

City and County of Kingston upon Hull

ANNUAL REPORT

UPON THE

HEALTH

of KINGSTON UPON HULL

FOR THE YEAR

1958

ALEXANDER HUTCHISON

Medical Officer of Health and Principal School Medical Officer

Health Committee, 1958-59

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Staff of the Health Department

Medical Officer of Health :

ALEXANDER HUTCHISON

Deputy Medical Officer of Health :

ANGUS MCGREGOR, M.A., M.D., B.CHIR., D.P.H.

Senior Medical Officers :

School Health Service : ALASTAIR M. R. CANN, M.D., M.R.C.S., L.R.C.P., D.C.H.

Care and After-Care : ALAN H. FAIRLAMB, M.B., B.S., C.P.H., D.P.H.

Maternity and Child Welfare : MARGARET I. HENDRIE, M.D., D.P.H., D.C.H.
D. Obst. R.C.O.G.

Assistant Medical Officers :

(Combined duties in Maternity and Child Welfare, School Health and Port Health Services)

GEOFFREY R. WALKER, M.B., CH.B., D.P.H., D.T.M.

KATHLEEN A. WILSON, M.B., CH.B., B.A.O., L.M., D.P.H.

CHRISTINE N. R. CAMPBELL, M.B., CH.B.

ELIZA J. CARSON, M.B., CH.B., B.A.O.

JEAN M. BARROWMAN, M.B., CH.B.

SAMUEL KLINGER, M.D. (Vienna)

MARGARET M. BELL, B.A., M.B., B.Ch., B.A.O., D.C.H., D.P.H.

FRANCES W. MOYES, M.B., CH.B.

BRYAN REFFOLD, M.B., B.S.

ALLEN V. HOLLINGWORTH, M.B., CH.B., M.R.C.S., L.C.R.P.

ELIZABETH WALES, L.M.S.S.A. (London), M.B., B.S. (Durham).

Nursing Officer :

Superintendent : FLORENCE HOLDEN, S.R.N., S.C.M., H.V.CERT., Q.I.D.N.

Health Visitors :

Tutor : MIRIAM HUDSON, S.R.N., S.C.M., H.V.CERT., TUTORS' CERT.

27 Health Visitors ; 11 Students

Midwives :

Non-Medical Supervisors : MAUD B. GREENLEY, S.R.N., S.C.M.

GLADYS BOLTON, S.R.N., S.C.M., MID. TEACHERS' CERT.

47 Midwives

District Nurses :

Acting Superintendent : ELSIE JONES, S.R.N., S.C.M.

43 Female Nurses, 5 Male Nurses

Home Helps :

Organiser : MURIEL M. FIELD

1 Assistant Organiser and 216 Home Helps

Tuberculosis :

Consultant Chest Physician : ROBERT HARDY, M.D., D.P.H. (Part-time)

5 Tuberculosis Visitors

Staff of the Health Department—continued

Mental Health :

Senior Mental Health Worker : ERIC ELLIOTT, R.M.P.A., R.M.N.
9 Mental Health Workers

Occupation Centre Supervisors :

JUNIOR (Holden Centre) RICHARD N. V. SHANE
ADULT (Male) HENRY PARSONS
ADULT (Female) EDNA TOWNHILL
Matron, St. Mungo House MARGARET HOBSON, S.R.N.
9 Assistant Supervisors ; 4 Instructors ; 5 Attendants

Food Inspection :

Chief Food Inspector : S. RHODES, F.R.S.H., F.A.P.H.I.
Senior Food Inspector : L. R. GOURD, M.A.P.H.I.
5 Food Inspectors

Sanitary and Housing :

Chief Public Health Inspector and Chief Housing Inspector :
A. C. SAWORD, D.P.A., F.R.S.H., F.A.P.H.I.
Deputy Chief Public Health Inspector : H. HARRISON, F.R.S.H., M.A.P.H.I., A.M.I.S.E.
Senior Inspectors : Housing—E. R. BOOTH, M.R.S.H., M.A.P.H.I.
Smoke and Offensive Trades—G. W. MAXTED, D.P.A., M.A.P.H.I.
Factories and Shops—A. BLADES, M.A.P.H.I., D.I.S.A.A.
Food and Drugs—H. SMITH, F.A.P.H.I.
Lodging Houses—L. H. SMITH, M.A.P.H.I.
23 District and Special Inspectors, 11 Student Inspectors.

Ambulance Service :

Chief Ambulance Officer : R. G. YATES
Deputy Ambulance Officer : F. J. GRANT
81 Ambulance Driver/Attendants

Clerical :

Chief Clerk : G. PATRICK, D.P.A.
Deputy Chief Clerk and Senior Administrative Assistant : J. H. WILSON
Senior Section Clerks : G. WISE, D. E. MONSON, E. WHEELBAND, A.C.I.S., D.P.A.,
H. CHAPMAN, F. N. HIND, D.M.A., D.P.A., A. S. ATKINSON, E. N. DALBY, D.M.A.
65 Clerks

SUMMARY :

	Whole-time	Part-time
Medical Staff	16	—
Clerical Staff	74	—
Inspectorial Staff	48	—
Nursing (including Students)	166	13
Mental Health	27	—
Disinfecting	6	—
Domestic Helps and " Sitters-up "	55	241
Domestic Workers	19	40
Ambulance (including Maintenance &c.)	92	—
Medical Auxiliaries	2	1
Rodent Operatives, &c.	20	—
Others	6	12
Totals	531	307

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GUILDHALL,

KINGSTON UPON HULL.

May, 1959.

My Lord Mayor, Ladies and Gentlemen,

I have pleasure in presenting to you my seventh Annual Report for the City for the year ended 31st December, 1958, and have included in the volume a report on the School Health Service for that year.

The number of births, 5,745, was the highest recorded since 1950, giving a birth rate of 18.32 per thousand as compared with the figure of 16.4 for England and Wales. There was, however, a rise in the number of deaths, 3,319, as compared with 3,144 in 1957 which was the lowest ever recorded in the City. There was an increase in the total number of deaths from cancer but deaths from cancer of the lung and bronchus fell by 18. There was a definite increase in the deaths from cancer of the digestive system in women.

The infantile mortality rate was the lowest ever recorded in the City being 24.2, but this is still slightly higher than the figure for England and Wales which is 22.5. A perinatal mortality of 36.37 is a major factor in keeping the infantile mortality rate as high as it is, and a determined effort must be made to reduce perinatal mortality if the infantile mortality rate is to be brought below the figure of 20.0, which is not impossible.

The shortage of maternity beds is still acute. Of the 5,540 confinements, 2,701 took place at home and 2,839 in institutions, *i.e.* approximately 50% in institutions and 50% at home. The number of institutional beds in the City is 84, 74 of these being at the Hedon Road Maternity Hospital. Of the cases admitted to the Maternity Hospital, 1,286 were discharged before the tenth day and 1,422 on the tenth day and after. Bearing in mind that the Central Midwives Board Rules require a woman to be kept in hospital ten days after confinement, it will be seen from the above that this is not being carried out in Hull; indeed the average stay for a woman in the Maternity Hospital during 1958 was $8\frac{1}{2}$ days. As the majority of these women were in hospital a day or two before delivery it is clear that they had to be discharged much earlier than the ten days after confinement prescribed by the Central Midwives Board.

To help in the care of these women discharged from the Maternity Hospital, part-time nurses had to be employed by the Department. Hull with its large number of slums must of necessity have a large number of sociological bookings, but the number of women admitted to hospital on sociological grounds has had to be steadily reduced over the past years, so that from a figure of 120 per month the number of social beds available has now been reduced to 55 per month in

order to make room for cases admitted to the hospital on medical grounds. This is most unsatisfactory and should be rectified at the earliest possible date. During the year there were six maternal deaths giving a maternal mortality rate of 1.0 as compared with the national figure of 0.43.

The District Nurses continue to do excellent work. The number of patients attended was 7,131 and the total number of visits 208,624.

The number of hours provided by the Home Help Service has again had to be increased. This is partly due to the fact that although there should theoretically be some 600 beds available in the City for geriatric patients, there are in fact only about 300. The plight of many of the old people in the City who should be in hospital but for whom there are no beds available is one which has caused the medical profession in the City a good deal of concern, but all services have rallied round and have done their best to make the lot of these old people as comfortable as possible. The Health Visitors, in conjunction with the General Practitioners, the Home Help Service and the Care and After-Care Service, which supplies various nursing aids for the old people, have contributed in no small measure to the easing of the burden of the aged infirm.

1958 saw the abandonment of the scheme to erect a Health Centre on the Bilton Grange Estate. Whilst this decision ultimately became inevitable, it was reached with great reluctance as over a period of six years City Council members and officials have devoted a great deal of time and thought to the scheme.

One of the outstanding events of the year was the enormous effort made by the Department to meet the demand for poliomyelitis vaccination. At the end of 1957 a total of 44,575 persons were awaiting vaccination, but unfortunately the supply of British vaccine was extremely small. The importation of large quantities of Salk vaccine from Canada and the U.S.A. helped to ease the position, but in Kingston upon Hull this type of vaccine was not acceptable to a substantial proportion of the children's parents. In September, the Ministry extended the scheme to include the 15 to 25 years age group and recommended a third injection as a reinforcement for all persons seven months after the completion of the initial course of two injections.

To meet this challenge, every section of the Department contributed either directly or indirectly. During the year, the staff of the Department gave approximately 73,000 injections under this scheme, which for the statistically minded, means that an average of one injection was given every 90 seconds during which the Health Department was open to the public. In addition, General Medical Practitioners gave approximately another 20,000 injections under the scheme.

The response to the anti-poliomyelitis scheme has been magnificent so far as concerns children under 15 years of age, about 75% of whom have been registered for vaccination. By the end of 1958, just over half of all children in this age group had in fact completed a course of two injections. The position in regard to the 15 to 25 years age group, however, was far from satisfactory at the end of the year, the number of registrations representing only about 14% of those eligible.

One unfortunate effect of the necessity to divert so much of the work of the Department to the poliomyelitis vaccination scheme was that the routine campaign for immunisation against diphtheria had to be severely curtailed. The mobile unit was only sent to schools during eight weeks of the year, with the result that the total number of primary immunisations against diphtheria given during the year fell from 3,566 in 1957 to 2,262 in 1958, and the number of reinforcing injections from 7,141 to 3,365. Although only one case of diphtheria was confirmed during the year, cases have been occurring regularly throughout the last five years and it remains of the utmost importance that the number of infants and children immunised should be at a high level.

Another outstanding event in 1958 was the opening of the new Central Ambulance Station in September. The Ambulance Service has been working under a severe handicap since its inception in 1948, due to the lack of suitable accommodation for offices, garaging and staff quarters. The staff and vehicles have had to be deployed in various premises in the City and it was not always possible to keep vehicles under cover when not in use. The new Station, situated within two or three hundred yards of the City Centre, provides the conditions necessary for the efficient and economical running of the service.

Following the suggestion put forward in Ministry of Health circular 6/58, the Health Committee considered the question of co-ordination of home safety measures, as a result of which it was decided to set up a Home Safety (Advisory) Committee. This Committee met for the first time in November, membership being drawn from all other Corporation Committees having an interest in this problem.

In the field of mental health, very active consideration has been given to the provision of facilities for the adult mentally handicapped. As a measure aimed at giving some immediate help with the adult males, the disused Child Welfare Clinic situated on Sutton Road was converted for use as an Annexe to the temporary Male Adult Centre situated in George Yard in the heart of the town.

The Sutton Road Annexe opened in February and accommodates twelve trainees who attend on a weekly rota basis from the main Centre. A large garden, with greenhouse, is available for horticultural training, whilst during inclement weather handicraft work can be carried out indoors.

As a long term measure, plans were considered for the erection of a permanent Adult Occupation Centre to accommodate 120 males and 80 females. By the end of the year the initial sketch plans had been approved and it is hoped that by the middle of 1959 the erection of the Centre will have commenced.

Other building plans agreed upon by the City Council during the year included the erection of a combined Maternity and Child Welfare and School Health Clinic on the Bilton Grange Estate (in substitution for the abandoned Health Centre Scheme), and a new City Mortuary. It is anticipated that the clinic will be completed during 1959, but the City Mortuary scheme was held up for some time whilst agreement was reached as to a suitable site.

The B.C.G. vaccination scheme for 13 year old children has now been in operation for five years, during which time 50% of all eligible children have been vaccinated. No case of respiratory tuberculosis has been notified in a child resident in the City who has been vaccinated under the scheme. In comparison, however, there have been 19 notifications of respiratory tuberculosis in persons who, according to their ages at the date of notification, were in their thirteenth year during the time the scheme has been in operation but who did not take part in the scheme. Whilst a final verdict on the scheme cannot be given for some time yet, it is apparent that B.C.G. vaccination has contributed largely to the fall in notifications in the 15 to 25 years age group.

In October, the Minister of Housing and Local Government confirmed the first three Smoke Control Orders made by the Council and these will become operative on 1st June, 1959.

On 6th June, a One Day Conference was held to mark the coming into operation of the industrial provision of the Clean Air Act. The Conference was a joint effort between the City Council and the Hull Productivity Committee and was attended by representatives of many local firms.

The report on Environmental Hygiene contains interesting details of scientific instruments acquired to assist the Public Health Inspectors in their work.

The slum clearance scheme progresses favourably and to date the Department is keeping abreast with the programme which was placed before the City Council in 1955.

The work of the Food Inspectors goes on as usual. It is most interesting to note that all animals brought into the City after slaughter must be inspected before being sold and I am indeed grateful to the trade for helping me to maintain this complete inspection.

As requested by the Minister, the Report includes a brief review of the first ten years of the National Health Service Act. This review is intended to show not what the Local Health Authority has done in its own sphere, but rather to illustrate how its work has been moulded into the general pattern of the health service.

I feel that I must say a word or two in praise of the Press. They have reported the proceedings of the Health Committee most fairly and have helped me in no small measure in various health campaigns which have been put forward by the Department.

To my colleagues in the hospitals I would express my thanks. When I have asked for their help, it has always been forthcoming, especially in the difficult field of geriatrics. The continued co-operation which the Department has received from all branches of the profession, Consultants and General Practitioners, has indeed been a comfort to me and one which I value.

The staff as usual have worked exceedingly well during the year. At one time it seemed as if it would be impossible to carry out all the work of the Department and at the same time meet the tremendous demand on the clerical and medical staff of the poliomyelitis vaccination scheme, but as usual the staff rose to the occasion and as I have said earlier the poliomyelitis vaccination scheme was a resounding success. The relationships of the staff with the public and with the medical profession are excellent; to the staff I would like to express my warm appreciation for all they have done to make the Department such a progressive and happy one.

Finally, I would like to pay tribute to the Chairman and Members of the various Committees and Sub-Committees dealing with health matters, who have on all occasions supported and encouraged me.

I have the honour to be,

Your obedient Servant,

ALEXANDER HUTCHISON,

*Medical Officer of Health and
Principal School Medical Officer.*

PART I

STATISTICS

SOCIAL CONDITIONS

GENERAL HEALTH SERVICES

VITAL STATISTICS

Area of City in Acres.....	14,493	
Census Population at 8th April, 1951.....	299,105	
	<i>1958</i>	<i>1957</i>
Estimated Mid-year Home Population	301,100	300,500
Marriages	2,576	2,521
Marriage-rate per 1,000 population.....	17.11	16.78
Deaths (all causes).....	3,319	3,144
Crude death rate per 1,000 population.....	11.02	10.45
Adjusted death rate per 1,000 population.....	13.66	12.96
Mothers and Infants—		
Live Births—Total	5,745	5,500
Legitimate— Male.....	2,792	2,647
Female	2,643	2,550
Illegitimate— Male.....	166	166
Female	144	137
Illegitimate Live Births per cent. of total live births.....	5.39	5.50
Crude birth rate per 1,000 population.....	19.08	18.26
Adjusted birth rate per 1,000 population	18.32	17.57
Still Births—Total	139	137
Legitimate — Male	60	64
Female	64	64
Illegitimate— Male.....	8	6
Female	7	3
Still births rate per 1,000 live and still births.....	23.62	24.30
Total Live and Still births.....	5,884	5,637
Deaths of Infants under 1 year of age—Total.....	139	161
Legitimate —Male	64	85
Female	68	69
Illegitimate— Male.....	4	6
Female	3	1
Infant Mortality Rate per 1,000 live births—Total.....	24.19	29.27
Infant Mortality Rate per 1,000 live births—legitimate.....	24.29	29.63
Infant Mortality Rate per 1,000 live births—illegitimate.....	22.58	23.10
Deaths of Infants under 1 month of age—Total.....	98	104
Rate per 1,000 live births.....	17.06	18.91
Perinatal Mortality	36.37	40.45
(Perinatal mortality is still births plus deaths under 1 week per thousand live and still births)		
Maternal Deaths (including abortion)	6	3
Death rate per 1,000 live births.....	1.04	0.54
Death rate per 1,000 live and still births.....	1.01	0.53

Births and Deaths. Births in Kingston upon Hull during 1958 were the highest since 1950. There was an increase in the total deaths, however, as compared with 1957, when there was the lowest number since records were first maintained.

Births and Deaths since 1900

<i>Year</i>	<i>No. of births</i>	<i>Birth rate per 1,000 population</i>	<i>No. of deaths</i>	<i>Death rate per 1,000 population</i>
1958	5,745	19.1	3,319	11.0
1957	5,500	18.3	3,144	10.4
1956	5,578	18.6	3,220	10.7
1955	5,413	18.1	3,240	10.8
1954	5,490	18.3	3,205	10.7
1950	5,825	19.3	3,476	11.5
1940	4,984	18.6	4,089	15.3
1930	6,288	20.6	3,833	12.5
1920	8,469	29.1	3,834	13.2
1910	8,014	29.1	4,253	15.2
1900	7,820	32.7	4,610	19.2

The births and deaths in Kingston upon Hull in 1958 were spread over the year as follows :—

	<i>1st Quarter</i>	<i>2nd Quarter</i>	<i>3rd Quarter</i>	<i>4th Quarter</i>
Deaths	999	790	657	873
Births	1,404	1,356	1,541	1,444

The number of deaths in each quarter followed the normal trend, the greatest number occurring in the first quarter.

Area Comparability Factors. The area comparability factors for this City as notified by the Registrar General are 0.96 for births and 1.24 for deaths. The adjusted birth-rate is therefore 18.3 per 1000 population and the adjusted death-rate 13.7

Male and Female Deaths. There were 1,716 deaths of males and 1,603 deaths of females. This was a smaller disparity than in recent years, being 93 female deaths to each 100 male deaths.

Cancer. The number of deaths from cancer including leukaemia and aleukaemia was 652 compared with 628 in 1957. The death rates were 2.16 in 1958 and 2.09 in 1957. Almost one out of every five deaths in the city is due to cancer. There were fewer deaths from cancer of the lung and bronchus than in 1957, the figures being 128 males and 17 females in 1958, and 145 males and 18 females in 1957. The disparity between the sexes was also less in 1958 than in the previous year but it was still formidable. Once again 60 per cent of the deaths

PRINCIPAL SITES OF FATAL CANCER, 1958

SITE OF DISEASE		AGE GROUP								Tot- als	Grand Totals
		0-5	5-10	10-15	15-25	25-45	45-65	65-75	over 75		
Buccal Cavity and Pharynx	M.	—	—	—	—	—	2	5	3	10	} 12
	F.	—	—	—	—	—	—	1	1	2	
Digestive System and Peritoneum	M.	1	—	—	—	6	50	49	36	142	} 277
	F.	—	—	—	—	6	36	33	60	135	
Respiratory System	M.	—	—	—	—	4	76	40	13	133	} 149
	F.	—	—	—	—	2	9	3	2	16	
Uterus	F.	—	—	—	—	4	18	8	2	32	32
Other Female Genital Organs	F.	—	—	—	—	1	11	10	3	25	25
Breast	M.	—	—	—	—	—	—	—	—	—	} 40
	F.	—	—	—	—	4	13	7	16	40	
Male Genital Organs	M.	—	—	—	—	1	3	2	10	16	16
Urinary Organs	M.	—	—	—	—	—	10	3	6	19	} 31
	F.	—	—	—	—	—	5	2	5	12	
Skin (scrotum excepted)	M.	—	—	—	—	—	—	2	—	2	} 4
	F.	—	—	—	—	1	—	1	—	2	
Brain and other parts of the nervous system	M.	1	1	—	—	1	1	1	—	5	} 12
	F.	—	—	—	1	2	3	1	—	7	
Other or Unspecified Organs	M.	1	1	—	2	6	8	7	4	29	} 51
	F.	2	—	—	—	3	6	5	6	22	
Total	M.	3	2	—	2	18	150	109	72	356	} 649
	F.	2	—	—	1	23	101	71	95	293	

N.B.—These figures have been compiled locally and may not agree with those of the Registrar-General which have been used elsewhere in this Report.

from cancer of the lung and bronchus occurred in persons under the age of 65 whilst in deaths from all causes the position was that 60 per cent of the mortality occurred in persons over 65 years of age.

Heart Disease. Deaths from coronary disease, angina, hypertensive heart disease and other heart diseases were 1,023 in 1958, this representing 30.7 per cent of all deaths. The comparable figures from 1957 were 927 and 29.5 per cent. Nearly 8 out of 10 of these deaths occurred at over 65 years of age. The death rate for all heart diseases was 3.3 per 1,000 of the population in 1958 and 3.1 in 1957.

Vascular lesions of Nervous System. There were 417 deaths in this classification (chiefly cerebral thrombosis or cerebral haemorrhage) giving a rate of 1.4 per 1,000 of the population. Approximately 80 per cent of the deaths from vascular lesions of the nervous system occurred at over the age of 65 years. The disparity between males and females followed the usual trend in this particular cause of death, being in the proportion of 162 females to 100 males.

Influenza, Pneumonia, Bronchitis and other Non-Tuberculous Respiratory Diseases. Deaths from these diseases numbered 455 compared with 462 in 1957. The combined death rate for these diseases was 1.5 per 1,000 of the population, the same as in 1957. There was no untoward incidence in any of these diseases, pneumonia and bronchitis accounting for most of the deaths.

Accidents in or near the Home. There were more deaths due to accidents in or near the home during 1958 than for a number of years past. Deaths from this cause were 63 and once again a high proportion resulted from old people falling. There were 4 deaths from burns and scalds, including that of a young man of 20 who fell asleep whilst smoking in bed. The table on page 20 summarises the deaths from accidents in or near the home during 1958.

This table underlines the well known facts that female deaths outnumber male deaths by two to one, and that almost half of the deaths from accidents in the home are in respect of females over 65 years of age who died as a result of a fall. Deaths from accidental gas poisoning are still causing some concern both nationally and locally. The various Gas Boards are following a number of suggestions in their efforts to make safer the use of gas appliances, particularly by old folk. Locally, in Kingston upon Hull, the Housing Committee decided to defer the installation of gas fittings in new aged persons dwellings until they were satisfied that adequate safety measures had been discovered.

CAUSE	SEX	0-4	5-14	15-44	45-64	65 and Over	TOTAL
Falls	M.	—	—	1	—	13	14
	F.	—	—	—	—	30	30
Gassing	M.	—	—	—	—	1	1
	F.	—	—	—	—	5	5
Burns and Scalds	M.	1	—	1	—	1	3
	F.	1	—	—	—	—	1
Drowning	M.	—	—	1	1	—	2
	F.	1	1	—	—	—	2
Other	M.	—	1	—	—	—	1
	F.	2	1	—	—	1	4
Total		5	3	3	1	51	63

The number of deaths is only a small indication of the incidence of accidents in the home, it being impossible to ascertain the total number of such accidents. However, during 1958 the Victoria Children's Hospital kindly gave details of the cases treated at the hospital following an accident in or near the home. The fact emerged that nearly half of the accidents were due to burns and scalds. About a third of the burns resulted from contact with an open fire, whilst another sixth resulted from contact with an electric iron. More than three quarters of all these accidents concerned children under 5 years of age.

Deaths From Road Traffic Accidents The following is a report on residents of Kingston upon Hull who died as a result of a road traffic accident regardless of whether the accident occurred in Kingston upon Hull or elsewhere. Of the twenty nine deaths reported nineteen occurred within the boundaries of the City and ten at other places.

A summary of the accidents is as follows :—

Pedestrians (14); 11 were knocked down whilst walking across the road (2 being on a pedestrian crossing at the time); 3 were of children running across the road.

Car drivers etc. (5); 1 was a driver of a motor car, 4 were passengers in motor cars.

Motor cyclists etc. (5) ; 3 motor cyclists were in collision with motor cars ; 1 girl (3 years of age) was a passenger in the side car of a motor cycle which collided with a motor car ; 1 motor cyclist was found dead on the road.

Cyclists (5); 4 knocked down by cars or lorries ; 1 knocked down by a motor lorry trailer.

Deaths due to road traffic accidents by sex and age

	Under 5 years	5-14 years	15-24 years	25-44 years	45-64 years	65 years and over	Total
Males	1	3	2	4	4	5	19
Females	2	1	—	2	2	3	10
Total	3	4	2	6	6	8	29

Fifty Years Ago. In 1908 there were 1,215 infant deaths which was a rate of 148 per 1,000 live births compared with 139 infant deaths in 1958 with an infant mortality rate of 24.2 There were no fewer than 342 infant deaths in 1908 due to diarrhoea compared with one infant death from Gastroenteritis in 1958. Other comparisons of numbers of deaths in the two years 1908 and 1958 are as follows :

	1908	1958
Measles	92	1
Whooping Cough	53	—
Diphtheria	47	—
Tuberculosis (all forms)	488	36

The first Notification of Births Act came into force on the 9th March, 1908 making it compulsory for every live and still birth to be notified to the Medical Officer of Health within 36 hours of the event. This duty is usually performed by the midwife attending the birth. The purpose of notification is to enable the local authority to provide any of their services which might be needed. Notification of a birth under this particular Act should not be confused with registration, the purpose of which is to establish the newly-born baby as a member of the community.

TABLE I—PRINCIPAL CAUSES OF DEATH, 1958

DEATHS IN AGE GROUPS OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT

CAUSE OF DEATH	Under 1 year	1 to 4	5 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75 years and over	All Ages			Total Deaths in 1957
									Male	Female	Total	
Tuberculosis of Respiratory System	—	—	1	—	8	12	7	4	25	7	32	46
Tuberculosis, other forms	—	1	—	—	1	2	—	—	1	3	4	3
Syphilitic Disease	—	—	—	—	—	2	1	—	2	1	3	9
W. pneumonia	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	1	—	—	—	—	1	1	1	—
Alasars	—	1	—	—	—	—	—	—	—	—	—	—
All other diseases classified as infective and Parasitic	—	—	—	—	—	—	—	—	—	—	—	—
Malignant Neoplasm, stomach	—	—	—	1	4	1	1	1	2	3	5	5
Malignant Neoplasm, lung, bronchus	—	—	—	—	4	31	28	40	64	39	103	93
Malignant Neoplasm, breast	—	—	—	—	5	83	44	13	128	17	145	163
Malignant Neoplasm, uterus	—	—	—	—	4	13	7	16	40	40	40	49
Malignant Neoplasm, lymphatic neoplasms	—	—	—	—	4	19	8	2	—	33	33	25
Other malignant and lymphatic neoplasms	—	2	1	3	22	104	90	92	157	157	314	283
Leukemia and Aleukemia	—	3	1	—	2	5	3	3	11	6	17	15
Diabetes Mellitus	—	—	—	—	—	2	—	4	3	7	10	9
Vascular lesions affecting central nervous system	—	—	—	—	—	70	133	205	159	258	417	415
Coronary disease, angina	—	—	—	1	8	152	171	170	302	200	502	421
Hypertension, with heart disease	—	—	—	—	2	6	19	32	26	33	59	50
Other heart diseases	—	—	—	—	14	6	17	293	173	292	465	456
Other circulatory diseases	—	—	—	—	1	22	26	72	48	71	122	117
Influenza	—	—	—	1	2	9	38	5	12	13	25	154
Pneumonia	27	6	1	2	3	41	82	67	102	83	185	171
Bronchitis	2	—	—	1	3	63	81	81	159	73	232	221
Other diseases of Respiratory System	—	—	—	—	5	13	13	2	14	3	17	16
Ulcer of Stomach and Duodenum	—	—	—	—	1	13	3	3	23	10	33	21
Gastritis, Enteritis and Diarrhoea	1	—	—	—	2	16	1	3	5	8	13	13
Nephritis and Nephrosis	—	—	—	—	2	9	9	15	30	18	48	41
Hyperplasia of prostate	—	—	—	—	3	4	8	35	47	6	47	36
Pregnancy, childbirth and abortion	—	—	—	3	—	—	—	—	—	—	—	—
Congenital malformations	31	1	1	8	9	—	—	60	16	22	38	38
Other defined and ill-defined diseases	74	2	2	1	4	51	22	5	102	126	228	231
Motor vehicle accidents	—	3	4	2	6	6	7	3	19	40	59	30
All other accidents	4	—	3	7	8	30	12	40	36	46	82	59
Suicide	—	4	—	4	14	30	7	6	41	20	61	52
Homicide and operations of war	—	—	—	—	1	—	1	—	1	1	2	5
Total	139	23	14	32	155	839	843	1274	1716	1603	3319	3144

Figures supplied by the Registrar General

TABLE II
INFANT MORTALITY (NET DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE)—1958

CAUSES OF DEATH	1st Day	2nd Day	3rd Day	4th Day	5th Day	6th Day	7th Day	1st Week	2nd Week	3rd Week	4th Week	Under 1 Mth.	1/2 Mths.	2/3 Mths.	3/4 Mths.	4/5 Mths.	5/6 Mths.	6/7 Mths.	7/8 Mths.	8/9 Mths.	9/10 Mths.	10/11 Mths.	11/12 Mths.	Total	
																								1958	1957
Bronchitis	—	—	—	—	—	—	—	—	2	4	—	2	5	5	1	3	2	—	—	1	—	—	—	2	2
Pneumonia (all forms)	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—	25	37
Gastro Enteritis	9	3	1	1	1	—	—	15	1	—	—	16	1	—	—	—	—	—	—	—	—	—	—	1	4
Injury at Birth	—	—	—	—	—	—	—	18	—	—	—	18	—	—	—	—	—	—	—	—	—	—	—	16	14
Atelectasis	—	—	—	—	—	—	—	10	7	1	3	21	5	1	1	—	—	—	—	—	—	—	—	19	30
Congenital Malformations...	1	2	3	1	2	1	—	23	3	—	—	26	—	2	1	—	—	—	—	—	—	—	—	32	33
Prematurity	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	26	24
Asphyxia (Overlying)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1
Meningitis (not T.B.)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	1
Other Causes	6	2	1	—	—	—	—	9	1	1	—	11	—	1	1	—	1	—	—	—	1	—	—	16	15
Total	43	12	8	7	3	1	1	75	14	6	3	98	11	10	3	3	4	—	3	2	1	2	2	139	—
1957	41	19	14	12	2	3	—	91	8	2	4	105	16	17	5	4	3	4	1	—	4	2	—	—	161

These figures have been compiled locally and may not agree with those in Table I.

TABLE III
VITAL STATISTICS FOR THE YEAR 1958 IN RESPECT OF THE 21 WARDS IN THE CITY

District	Estimated Population	Area in acres, Land and Inland Waterways	Persons to an acre	No. of Births	Birth Rate per 1,000 Population	No. of Deaths	Death Rate from all causes per 1,000 Population	* No. of Deaths under 1 year	*Deaths under 1 year per 1,000 Live Births	† Perinatal Mortality Rate
Albert	8,452	285	29.7	331	39.2	109	12.9	9	27.2	41.3
Alexandra	14,733	598	24.6	333	22.6	158	10.7	10	30.0	32.4
Beverley	13,128	993	13.2	186	14.2	147	11.2	6	32.3	61.9
Botanic	12,729	248	51.3	354	27.8	178	14.0	12	33.9	30.4
East Central	6,433	170	37.8	169	26.3	89	13.9	4	23.7	40.2
West Central	9,710	120	80.9	230	23.7	125	12.9	6	26.1	42.2
Coltman	13,994	220	63.6	455	32.5	163	11.6	6	13.2	19.5
Drypool	6,620	381	17.4	198	29.9	75	11.3	6	30.3	34.5
Marfleet	14,899	1,401	10.6	243	16.3	102	6.8	1	4.1	16.2
Myton	3,744	263	14.2	104	27.8	71	19.0	2	19.2	55.6
Newland	16,426	705	23.3	192	11.7	205	12.6	6	31.3	45.9
North Newington	14,893	278	53.6	240	16.1	221	14.8	9	37.5	37.0
South Newington	12,276	332	37.0	252	20.5	138	11.2	7	27.8	23.5
Paragon	3,269	220	14.9	60	18.4	39	11.9	2	33.3	32.8
Park	9,050	214	42.3	211	23.3	123	13.6	5	23.7	28.0
Pickering	33,193	1,472	22.5	261	7.9	338	10.2	3	11.5	37.0
St. Andrew's	12,746	1,075	11.9	262	20.5	120	9.4	7	26.7	44.6
Southcoates	10,917	202	54.0	282	25.8	122	11.2	9	31.9	54.4
Stonessy	17,870	1,610	11.1	255	14.3	174	9.7	3	11.8	23.1
Sutton	34,694	2,130	16.3	750	21.6	293	8.4	13	17.3	31.3
University	31,324	1,576	19.9	377	12.0	329	10.5	13	34.5	58.8
TOTAL	301,100	14,493	20.8	5,745	19.1	3,319	11.0	139	24.2	36.4

NOTES—Ward populations have been estimated on the basis of the 1951 census figures.

* Most of the infantile mortality rates of wards are based on very small numbers and comparisons with other areas or earlier years may have little statistical significance; it is preferable to refer to the absolute numbers involved.

† Perinatal Mortality Rate is stillbirths plus deaths under 1 week per thousand live and stillbirths

NATURAL AND SOCIAL CONDITIONS OF THE AREA

METEOROLOGY

Meteorological records are kept by the General Superintendent of Parks at a Climatological Station in Pearson Park. Readings are taken daily at 9 a.m. and 9 p.m.

Particulars of the meteorological readings will be found in Table IV.

Eight feet above sea level

	1958	1957
Highest Mean Temperature	69.5 deg. 9th July	74 deg. 28th June
Lowest Mean Temperature	27.0 deg. 21st Dec.	33.5 deg. 2nd Dec.
Total Rainfall	28.56	24.94
No. of days on which rain fell	213	202
No. of sunless days	84	91
No. of hours of bright sunshine	1267.2	1339.4

Direction of prevailing wind :—

	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm
1958	16	43	6	41	29	94	8	63	65
1957	11	57	5	39	32	115	14	56	36

SUNSHINE AND RAINFALL FOR 1958 AND PREVIOUS 5 YEARS

	ANNUALLY		THIRD QUARTERS					
	Hours of Bright Sunshine	Inches of Rain	Hours of Bright Sunshine			Inches of Rain		
			July	Aug.	Sept.	July	Aug.	Sept.
1958	1,267	28.56	166.9	149.5	135.6	3.24	2.20	2.27
1957	1,339	24.94	122.6	124.9	124.5	3.29	3.10	3.46
1956	1,251	26.24	144.0	130.8	131.4	3.65	5.21	1.39
1955	1,494	19.68	241.3	160.2	153.2	.77	.77	5.3
1954	1,169	31.29	126.3	111.5	157.5	1.94	6.19	2.30
1953	1,279	21.40	185.7	201.6	156.2	2.20	2.52	0.68

TABLE IV

METEOROLOGICAL REPORT FOR THE YEAR 1958

	At Nine a.m. Local Time				Mean Relative Humidity	At Nine p.m. Local Time		Mean Temperature at 9 p.m. Readings	Underground Temperature		Total Hours of Bright Sunshine	Directions of the Wind								Total Rainfall																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
	Mean Reading of					Reading of Self-registering Thermometers			Temperature at 9 p.m. Readings			Temperature		Wind																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
	Baro- meter	Attach- ed Therm.	Dry Bulb Therm.	Wet Bulb Therm.		Max. in Air	Min. in Air		Mean Temperature at 9 p.m. Readings			Underground Temperature		Directions of the Wind																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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STATE OF EMPLOYMENT

Unemployment. Hereunder are particulars, kindly furnished by the Manager of the Kingston upon Hull Employment Exchange, in relation to unemployment as recorded by his Department.

							1958	1957
Average number of persons unemployed in one week of each month of the year :								
Men	....	....	....	....	....	....	3,816	2,584
Women		....	....	....	....	....	905	563
Juveniles		....	....	....	....	....	165	86
							<hr/>	<hr/>
							4,886	3,233
							<hr/>	<hr/>
Month in which " peak " period was reached							....	November
Total in " peak " period of one week							....	5,806
Month of lowest total of unemployment							....	January
Total unemployed recorded in such month							....	4,161

GENERAL HEALTH SERVICES

Registration of Nursing Homes. The number of registered nursing homes has remained unchanged throughout the year. All five were inspected by the Senior Medical Officer (Maternity and Child Welfare) and the two which take maternity cases were also visited by one of the Supervisors of Midwives at regular intervals.

There were 271 live births, 4 still births and no maternal deaths in private nursing homes during 1958.

X-Ray Facilities. The X-ray department at the East Hull Clinic dealt with cases from the following sources during the year :—

Chest Clinics	4,843
After-Care Section (Medical examination of Corporation employees)	873
Maternity and Child Welfare Section	137
School Health Service	123

Medical Examinations. Medical officers of the Department carried out 500 examinations of Corporation employees in connection with the Sick Pay Scheme and 732 examinations in respect of new appointments, admissions to the Superannuation Scheme and fitness to continue in employment. Examinations were carried out at the East Hull Clinic and the After-Care Section offices at Lowgate, and in 54 Sick Pay Scheme cases employees were examined in their own homes.

Open Spaces. Information supplied by the General Superintendent of Parks, etc., shows that there are in the city and immediately adjoining it, approximately 850 acres of Public Parks, Gardens, Recreation Grounds and open spaces owned by the Corporation ; and particulars kindly furnished by the Chief Education Officer indicate other open spaces to include sites controlled by the Education Committee and prepared for school playing fields, of an area of 344 acres. Additional sites not prepared for this purpose total 197 acres.

Public Baths, Wash-houses, etc., The City Engineer has supplied the following particulars of attendances at the public baths and wash-houses during 1958 :—

Swimming Baths	457,293
Slipper Baths	181,029
Electro Medical, etc.	16,025
Wash-houses	83,359
	<hr/>
	737,706
	<hr/>

The total attendances for the years 1957 and 1956 were 702,109 and 660,120 respectively.

City Mortuary. Towards the end of the year, the Health Committee again considered the question of erecting a new mortuary. As long ago as 1954 the Committee had agreed to build on the site of the existing mortuary, a disused burial ground in Castle Street. Difficulties in relation to that site had proved unsurmountable, however, and so it was decided to seek the aid of the Town Planning Committee in finding an alternative site. It was agreed also to proceed with the scheme for providing a new mortuary as quickly as possible with a view to the work being included in the Corporation's capital investment programme for 1959 as envisaged in Ministry of Housing and Local Government Circular 60/58.

During 1958 429 post-mortem examinations were carried out in the existing City Mortuary.

Inquests were held at the Coroner's Court, Police Headquarters, Queen's Garden's. Dr. Philip Science, Her Majesty's Coroner for the City, has kindly furnished the following statistics :

	1958	1957
Inquests and post-mortems (including post-mortems where inquests were found to be unnecessary)	811	788
Enquiries, etc., in connection with which there were no post-mortems	142	142
	<hr/> 953	<hr/> 930
Inquests with Jury, exclusive of adjournments	32	45
Bodies accommodated at		
City Mortuary	450	427
Hospitals, etc.	503	503
	<hr/> 953	<hr/> 930

Disposal of the Dead. The General Superintendent of Parks, etc., has submitted the following information regarding cemeteries :—

Total area of cemetery land	162 acres
Area in use for interments	104 „
Area reserved for cemetery extensions but used for other purposes	58 „

The present accommodation for the disposal of the dead is considered to be adequate for a number of years.

Cremations. The gradual changeover from earth burial to cremation as the means of disposal of the dead continues. In 1958 the Crematorium carried out 1,780 cremations during the year; this was more than ever before since the Crematorium was first opened in 1901. 1,247 of these cremations were in respect of residents of Kingston upon Hull, which was 38% of the total deaths for the same period.

CHEMICAL AND BACTERIOLOGICAL LABORATORIES

The chemical and bacteriological work undertaken in the City Laboratories in 1958 is the subject of a separate report by the City Analyst and Corporation Bacteriologist, D. J. T. Bagnall, Esq., A.C.G.F.C., F.R.I.C.

The number of samples examined chemically, excluding those submitted by the East Riding County Council and the Hull and Goole Port Health Authority, totalled 5,688, including 2,367 submitted under the Food and Drugs Act.

A total of 1,018 samples were submitted for bacteriological examination and included the following :—

Milk	....	....	....	....	....	....	438
Ice Cream	....	....	....	....	....	....	29
Ice Lollies, etc.	....	....	....	....	....	....	28
Waters	....	....	....	....	....	....	489

Most of the bacteriological work for this city is performed in the Medical Research Council's Public Health Laboratory, which is accommodated in the same building as the City Laboratories. The Public Health Laboratory is under the direction of Dr. J. H. McCoy, and serves as the bacteriological centre for a wide area of Yorkshire.

NATIONAL ASSISTANCE ACT 1948

Mr. G. H. Phillips Darley, Director of Welfare Services, has kindly supplied the following particulars about the working of the above-mentioned Act.

Section 21. Accommodation under the provisions of Section 21, National Assistance Act 1948, was provided during the year by the Welfare Services Department as follows :—

	<i>Residential</i>			<i>Temporary</i>		
	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
Welfare Services Hostel—						
160 Beverley Road (Closed 3.2.58)	—	—	—	—	6	2
Harley Street Hostel (Opened 3.2.58)	—	—	—	1	56	69
Bilton House—						
Wivern Road	20	25	—	—	—	—
Dunbar House, Sutton	38	—	—	—	—	—
Ferriby House, North Ferriby	10	37	—	—	—	—
Hugh Webster House, St. Luke's Street	16	31	—	—	—	—
Manor House, North Ferriby	13	25	—	—	—	—
Kingston Villa, Pearson Park	15	21	—	—	—	—
(As from 1.4.58)						
Mentone House, West Hill, Hessle	13	12	—	—	—	—
Netherhall, Sutton	—	35	—	—	—	—
Rose Villa, Beverley Road	—	35	—	—	—	—
Westbourne House, Westbourne Avenue	—	47	—	—	—	—
Westgate House, Hornsea	11	28	—	—	—	—
Wensley Lodge, Hessle	84	—	—	—	—	—
(Opened 10.2.58)						
Wilton House, Holderness Road	19	24	—	—	—	—
Other Premises	—	—	—	6	9	43
Welfare Services Hostel, 188 Anlaby Road (Closed 10.2.58)	*55	—	—	—	—	—
Total	239	320	—	7	71	114

* Not included in grand total as these residents transferred to Wensley Lodge on 10.2.58.

Included in the Grand Total above are 23 cases of evicted families, 3 of which remain, the balance of 20 being disposed of in the following manner :—

Found accommodation by own effort	14
Rehoused through Housing Department on approach by Welfare Services Department	5
Rehoused by Private Landlord on approach by Welfare Services Department	1

Accommodation under the provisions of Section 21 (4), National Assistance Act, 1948, was provided during the year by other Authorities who were reimbursed by this Authority as follows :—

		<i>Residential</i>			<i>Temporary</i>		
		<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
East Riding County Council	....	1	3	—	—	—	—
West Riding County Council	....	—	4	—	—	—	—
County Borough of Oldham	....	1	—	—	—	—	—
County Borough of Grimsby	....	—	1	—	—	—	—
Total		2	8	—	—	—	—

The need for accommodation was removed in a further 21 cases through disposal by the Welfare Services Department in the following manner :—

Rehoused through Housing Department	....	....	....	....	....	3
Rehoused through private landlords	....	....	....	....	....	1
Arrangements for accommodation at the Salvation Army Hostel and other Establishments (able-bodied men)	....	....	....	....	....	1
Returned to relatives following settlement of domestic upheaval through the medium of the Welfare Services Department intervention	....	....	....	....	....	5
Suspension of Eviction Notices or Orders to Quit following approach to agents or landlords by the Welfare Services Department	....	....	....	....	....	1
Fixed up with rooms	....	....	....	....	....	10

Section 47. In no case was action found to be necessary under the provision of Section 47, National Assistance Act, 1948.

Section 26. Under the provision of Section 26 the Welfare Services Committee made, during the year, financial contributions to 15 voluntary organisations in respect of residential accommodation provided by them, as follows :—

					<i>Men</i>	<i>Women</i>
Homes for the Aged....	....	....	....	....	15	31
Homes for the Deaf and Dumb	....	....	....	....	6	6
Homes for the Blind	....	....	....	....	15	9
Homes for Epileptics	....	....	....	....	11	6
Homes for Cripples	....	....	....	....	—	2
Total					47	54
					—	—

ANALYSIS OF CASES CERTIFIED AS BLIND—1958

	Con- genital Defect	Myopic Error	Glaucoma	Cataract	Vascular Diseases	Diabetic Retino- pathy	Affections of Coats of the Eye	Other Primary Ocular Defects	TOTAL
Number of Cases	1	8	8	35	2	3	17	10	84
History of Treatment :									
Not known	—	—	—	—	1	—	—	—	1
Incomplete	—	—	—	2	—	—	—	—	2
Treatment Refused	—	—	—	3	—	—	1	—	4
Condition not amen- able to treatment	1	7	1	7	1	3	14	5	39
Successful	—	—	2	9	—	—	—	—	11
None	—	—	2	10	—	—	—	2	14
Failed	—	1	3	4	—	—	2	3	13
	1	8	8	35	2	3	17	10	84
Prognosis :									
Likely to Deteriorate	—	7	7	28	2	3	16	6	69
Stationary	1	1	—	3	—	—	—	4	9
Uncertain	—	—	1	4	—	—	1	—	6
	1	8	8	35	2	3	17	10	84
Recommendations :									
None	1	7	6	26	1	2	16	8	67
Medical	—	—	1	—	—	1	—	2	4
Surgical	—	—	—	9	1	—	—	—	10
Hospital Supervision	—	1	1	—	—	—	1	—	3
	1	8	8	35	2	3	17	10	84

ANALYSIS OF CASES CERTIFIED AS PARTIALLY SIGHTED—1958.

	Congenital Defect	Myopia	Glaucoma	Cataract	Vascular Diseases	Affections of Coats of the Eye	TOTAL
Number of Cases	2	10	2	18	3	16	51
History of Treatment :							
Incomplete	—	—	—	1	—	1	2
Treatment Refused	—	—	—	1	—	—	1
Condition not amenable to treatment	2	9	—	3	3	15	32
Successful	—	—	1	6	—	—	7
None	—	1	—	6	—	—	7
Failed	—	—	1	1	—	—	2
	2	10	2	18	3	16	51
Prognosis :							
Likely to Deteriorate	—	9	1	15	3	13	41
Stationary	2	—	1	3	—	1	7
Uncertain	—	1	—	—	—	2	3
	2	10	2	18	3	16	51
Recommendations :							
None	2	3	—	8	1	11	25
Medical	—	1	—	1	1	1	4
Surgical	—	1	1	5	—	1	8
Optical	—	3	—	3	1	1	8
Hospital Supervision	—	2	1	1	—	2	6
	2	10	2	18	3	16	51

OPHTHALMIA NEONATORUM

(i) Total number of cases notified during the year	51
(ii) Number of cases in which :—	
(a) Vision lost	Nil.
(b) Vision impaired	Nil.
(c) Treatment continuing at end of year	Nil.

In pursuance of the provisions of Section 29, the Welfare Services Committee, through the agency of the Hull and East Yorkshire Institute for the Deaf made arrangements for the general welfare of the Deaf and Hard of Hearing, totalling 343 persons.

The following information has kindly been supplied through the Director of Welfare Services.

The total number of registered Deaf on the 31st December was 264 classified under the following age groupings :—

	<i>Males</i>	<i>Females</i>
16-20	16	9
21-50	80	60
51-64	26	20
65 and over	20	33
	<hr/> 142 <hr/>	<hr/> 122 <hr/>

The total number of Hard of Hearing on the register on 31st December was classified within the following age groupings :—

	<i>Males</i>	<i>Females</i>
16-20	—	—
21-50	9	10
51-64	13	15
65 and over	5	27
	<hr/> 27 <hr/>	<hr/> 52 <hr/>

The total number of Deaf and Hard of Hearing placed in employment from 1st January to 31st December, was 18.

Handicapped Persons (Other than the Blind, Partially Sighted, Deaf and Hard of Hearing).

The total number on the register is at present 1,745, classified as follows :

<i>Category</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Amputations	48	21	69
Joint and Muscular Diseases	70	298	368
Congenital Deformities	8	18	26
Diseases of Heart, Digestive System, Genito-Urinary System, etc.	159	215	374
Injuries, Diseases, Paralysis, etc., of Trunk and Limbs	141	201	342
Psychoneuroses, Mental Deficiency, etc.	55	80	135
Epilepsy, Spastics, etc.	108	125	233
Pulmonary Tuberculosis	42	8	50
Tuberculosis other than Respiratory	7	8	15
General Diseases, Asthma, Diabetes, etc.	37	96	133
	675	1,070	1,745

EPILEPTICS AND CEREBRAL PALSY

A cerebral palsy clinic is held from time to time at the Park Avenue Special School and children of both school and pre-school age are seen there for diagnosis and treatment. These children include not only those attending the school but others who are treated as out-patients.

The existence of the clinic is well known and cases are referred by general medical practitioners, hospitals and the Maternity and Child Welfare section of the Health Department.

No special arrangements exist for the treatment of epilepsy but examination for diagnosis can be made at the school pædiatric clinics.

Most of the epileptic children attend ordinary schools except when this is not possible owing to other physical or mental handicap and except for a very small number who, owing to bad home conditions, are resident in epileptic colonies.

Normally, arrangements for the treatment of both epileptics and cerebral palsies are made by the general practitioner.

The following three tables show the incidence of epilepsy and cerebral palsy so far as it is known.

Epileptics

Attending ordinary schools	...	...	...	...	...	39
Attending independent Schools	...	...	...	...	...	1
Attending special schools—						
Day educationally subnormal	...	...	...	...	...	6
Residential educationally subnormal	...	...	...	...	...	1*
Day physically handicapped	...	...	...	...	...	2*
Day open air	...	...	...	...	...	1
Day partially sighted	...	...	...	...	...	1
At approved school	...	...	...	...	...	1

* Also spastic

Cerebral Palsies

Pre-school children	...	...	...	...	...	7
Attending ordinary schools	...	...	...	...	...	13
Attending independent schools....	...	...	...	...	...	1
Attending special schools—						
Day Physically handicapped	...	...	...	...	...	28†
Residential physically handicapped	...	...	...	...	...	2
Day Educationally subnormal	...	...	...	...	...	4
Residential educationally subnormal	...	...	...	...	...	1‡
Day Deaf	...	...	...	...	...	3
Out of school	...	...	...	...	...	1

† Two children are also epileptic

‡ This child is also epileptic

Of the total number of mental defectives under Statutory supervision :—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Number who are subject to epilepsy	23	24	47
Number who suffer in varying degrees from cerebral palsy	7	9	16
Number who are subject to epilepsy and also suffer in varying degrees from cerebral palsy	3	2	5

PART II

ENVIRONMENTAL HYGIENE
AND SANITATION

GENERAL INFORMATION

Water. The Water Engineer and Manager has kindly supplied the following information.

The supply throughout the year has been satisfactory in quality but at the beginning of the year was slightly restricted in quantity.

Bacteriological examinations are taken frequently and chemical examinations at varying intervals. The chloramine process is in operation, the normal dosage being 0.15 parts per million.

The water supplied by this Undertaking is not liable to have plumbo-solvent action.

All water leaving the pumping stations is bacteriologically pure and when new mains are laid or alterations take place, such mains are sterilized before the water is put into circulation.

The number of dwelling houses and the estimated population supplied in the City and County of Kingston upon Hull area are 94,651 and 300,200 respectively. All the supplies taken from the Corporation's supply are direct main connections.

Drainage and Sewerage. The City Engineer reports that work has continued on the construction of the remaining sections of the West Hull and Haltemprice Joint Main Drainage Scheme. The contractor for the first section of the Northern Branch Trunk Sewer completed the concrete and brick tunnel linings to the 10' 9" diameter sewer from the Humberside Pumping Station to Spring Bank West in April and in June the existing sewer in Spring Bank West serving the Priory Road and Willerby Road areas was diverted into the new trunk sewer at Walton Street. In September, the existing sewer in Spring Bank West serving the Princes Avenue and Beverley Road areas was also connected to the new deep level sewer followed shortly by the diversion of the Chanterlands Avenue sewer into the trunk sewer. The effect of these connections has been to eliminate the Walton Street drainage bottleneck and to produce a substantial improvement in the drainage position in those areas served by the existing sewers previously mentioned, due to the increased rate of flow through them caused by their discharge into the deep main drainage system. Further improvement in the drainage position in West Hull has also resulted from the increased pumping facilities provided at the Humberside Pumping Station which has continued to operate very satisfactorily since it was first brought into use in July, 1957. Main drainage difficulties in the north of the city, west of the River Hull, will not be completely

eliminated however until the Northern Branch Trunk Sewer has been extended to the northern end of Hall Road and certain other trunk sewers constructed, viz. the Beverley Road/Princes Avenue Trunk Sewer and the Central Area Trunk Sewer.

The work on extending the Northern Branch Trunk Sewer north of Walton Street has proceeded satisfactorily. The first contract extending from Spring Bank West to the Setting Dyke, east of National Avenue, consists mainly of the construction of approximately 1,475 lin. yards of 9' 3" diameter sewer in tunnel under compressed air. The driving of the tunnels with the aid of tunnel shields was completed in July and it is estimated that the building of the in situ concrete and brick linings will be complete next February, after which this further section of the sewer will be brought into use. This will enable the flow in the Setting Dyke to be diverted into the trunk sewer at a point to the east of National Avenue. As a result, some improvement in the surface water and land drainage of the Bricknell Avenue Housing Estate will be effected and the abandonment of the Setting Dyke itself, east of National Avenue made possible.

The second contract for the Northern Branch Trunk Sewer extending from the Setting Dyke, east of National Avenue, via Bricknell Avenue, Fairfax Avenue, to the northerly limit of Hall Road, consists mainly of trunk sewers varying in size from 8' 6" to 4' 6" in diameter, the total length being approximately 3,100 lin. yds. This work is being carried out in open cut construction, some of the sewer, due to bad ground conditions, having to be supported on concrete bearing piles. It is expected that the first part of the trunk sewer, as far north as Cottingham Road, will be completed by mid 1959 and the second part, to the northern end of Hall Road, by early 1961. When the latter has been completed, further development in North Hull, including that part of the Orchard Park Estate within the city, will be possible. Full development of the area adjoining Bricknell Avenue cannot take place, however, until the Haltemprice Urban District Council divert the drainage of the Cottingham district from the city's sewer in Bricknell Avenue into the Northern Branch Trunk Sewer following the construction of their Cottingham Branch Trunk Sewer. The completion of the Northern Branch Trunk Sewer will also relieve various overloaded existing sewers, enable two sub-pumping stations to be eliminated and make it possible to abolish two further agricultural drains, namely the Cottingham and Newland Beck and the Cottingham Drain which will be intercepted into the trunk sewer. The policy of advising the restriction of development in certain areas of the city due to the lack of capacity in the existing sewerage system has continued although the completion of the first section of the Northern Branch Trunk Sewer, previously referred to, resulted in some areas being freed from these restrictions to the west of the River Hull. In the eastern part of the city, many of the sewers serving

the Sutton and Stoneferry areas are seriously overloaded during times of heavy and prolonged rain and a drainage bottleneck occurs where these sewers converge in James Reckitt Avenue. Drainage restrictions will, therefore, be necessary in certain areas until such times as the sewerage system is relieved by the completion of the necessary main drainage works in both the eastern and western sections of the city.

Design work on the East Hull Main Drainage Scheme to deal with the drainage of the area within the city between the River Hull and the Holderness Drain has continued and a report was submitted to the Works Committee in October. This report dealt with the present unsatisfactory and inadequate sewerage system in this area and included proposals for the construction of trunk sewers and substantial extensions to the existing East Hull Pumping Station on Hedon Road in order to provide for the efficient drainage and development of the area. The report also contained an associated outline scheme for the abandonment of the Foredyke Stream by discharging its flow into the Holderness Drain where they cross at Great Culvert outside the city, coupled with the pumping of water from the Holderness Drain by the extended East Hull Pumping Station. The Committee approved the proposals in principle but subsequently they were referred back by the Council for further consideration. The Works Committee have since deferred further consideration of the proposals pending consultations on them with the Town Planning Committee.

At the beginning of the year, the Corporation's Consultant was requested to submit a further report for the drainage of the area east of the River Hull and north of Sutton Road by means of a separate treatment works, based on a revised phased development plan prepared by the Town Planning Officer. This report was received from the Consultant in December and will be considered by the Works Committee in due course.

The City Engineer further reports that in May, following consultations with other affected Chief Officials, he submitted a report to the Works Committee on the peaceful uses of radio-isotopes, the disposal of radio-active wastes and radiation hazards. The report, which was adopted by the Council, recommended (a) that the Ministries concerned give consideration to the making of regulations to assist local authorities in safety measures, (b) that the Atomic Energy Authority records of supplies to users within the sewerage and water areas be made available to the respective local authorities, the users to consult with and agree the method of safe disposal of radio-active substances and wastes with the local authorities, (c) that local authorities be kept informed of the production of radio-active

substances in nuclear reactors and devices operated by private industries, laboratories and academic establishments, such bodies to consult with and agree methods of safe disposal of radio-active substances and wastes with the local authorities and (d) that local authorities be given every facility (i,) for the inspection of premises in which radio-active substances are produced and/or used, (ii,) to agree the application of methods of detection and measurement and (iii,) to satisfy themselves that all available methods of control are used and that discipline is enforced in the use of these methods. Subsequently, the Works Committee authorised the purchase of a number of instruments for use in inspection and work in connection with the detection of radio-activity in buildings, sewers, pumping stations, etc. Arrangements were also made for two senior members of the technical staff of his Department to attend a course on Nuclear Energy at the Kingston upon Hull College of Technology.

Further work has been carried out in connection with the control of the discharge of trade effluent from both new and existing industries with the object of excluding from the sewers any effluents which might have a harmful effect on or be dangerous to the sewer men, or which would cause damage to the sewer fabric.

Watercourses, Streams, etc. All water courses and streams continue to receive attention with the object of preventing mosquito breeding and spraying with larvicide was carried out wherever necessary. Owing to the wet summer of 1958 the dykes were filled with water more frequently than is usual at this season of the year and in consequence, more inspectorial time had to be spent on this work. The development of new housing estates in outlying areas where there are fields, ditches and ponds also helped to account for an increased number of complaints concerning mosquitoes.

Public Cleansing. The Cleansing Services of the City are the responsibility of the Public Cleansing Superintendent and the main functions consist of :—

- (a) Collection of Refuse and Disposal
- (b) Street Cleansing (including snow removal)
- (c) Control of Public Conveniences
- (d) Clearance of bombed sites.

The Public Cleansing Superintendent has supplied the following information appertaining to the services :

Refuse Collection and Disposal :

	<i>Loads</i>	<i>Tons</i>
Total domestic and trade refuse collected	49,105	76,257
Disposal by separation and incineration	41,864	63,329
Disposal by controlled tipping	7,241	12,928
	49,105	76,257
Waste paper collected by special vehicles	1,731	768
Refuse from bombed sites	109	276
Refuse delivered by private traders and disposed of as follows :		
By separation and incineration	1,171	408
By controlled tipping	1,314	2,724
Total refuse dealt with	53,430	80,433

Total refuse disposed of by means of controlled tipping :

Refuse collected by the Department	7,241	12,928
Refuse delivered by private traders	1,314	2,724
Refuse from bombed sites	109	276
Residual materials from Refuse Disposal Plant (Dust, Clinker, Debris, etc.)	9,006	37,147
Street Sweepings and gully detritus	2,766	5,785
	20,436	58,860

The total refuse collected was 3,270 tons more than in 1957, the higher figure being accounted for by the development of housing estates and an increase in the collection of trade refuse.

Salvage. The following income was received from the sale of waste paper, scrap metals and steam:

	<i>£</i>
Waste paper	10,124
Scrap Metals	16,145—Price reduction of £6 per ton as compared with 1957.
Steam	9,933

Tips. The following tipping sites have been used during the year :—

Bransholme Farm	} almost completed.
Bilton Grange	

Hessle Foreshore—facilities are now mainly restricted to trade refuse.

Winestead—Tipping Rights acquired August, 1957.

Catwick Hill—Tipping Rights acquired June, 1958.

The two latter sites are each approximately 14 miles from the City Centre.

Street Cleansing. The mileage of streets within the city boundary is 262, and these are swept by 124 sweepers and 3 mechanical sweeping machines. The sweepers are organised on a 'Beat System,' each sweeper being allocated a specific area for which he is responsible.

5 Mechanical Gully machines are employed in the cleaning of street gullies and cesspits. The cleaning of cesspits is carried out for neighbouring Local Authorities and private firms, and the cost thereof recovered.

Heavy falls of snow were experienced in February and March, necessitating the engagement of casual labour and additional transport. Gritting of roads was also carried out during periods of frost and ice formation.

The Litter Act, 1958, came into force on 7th August, 1958, and to assist the public to comply therewith, an additional 400 litter baskets were purchased and erected. These are being used extensively by the public. The total number erected at the end of the year was 842.

Public Conveniences. No additional lavatory accommodation has been provided during the year. Arrangements are in hand for 4 new conveniences with facilities for both sexes and these are expected to be erected during the first half of 1959.

Staff. The staff of the Department at 31st December was 629, including Supervisory and Administrative Staff.

ENVIRONMENTAL HYGIENE AND SANITATION

This section of the Report, together with the following sections on Housing, and Food & Drugs, deals with the work of the Public Health Inspectors. Upon reference to Table V it will be seen that the total number of inspections made during the year was 1,903 less than in the preceding year but this was partly offset by an increase of 973 in the number of re-visits and re-inspections. There was an increase in the number of notices served and defects remedied. Perhaps the most significant change revealed by Table V is the substantial increase in the number of statutory notices served and the reduction in the number of informal notices. This is a continuation of a general trend noted in previous years and is the result of staffing difficulties. Throughout the year, there were never less than fifteen vacancies among the inspectorial staff and it would have been impossible for them to cope with the work had it not been for this speeding up of statutory procedure. Further evidence of this necessary change in policy will be seen in the increased number of cases where work was carried out by the local authority in default of owners, and in the greater number of prosecutions—see Table VI and following paragraph.

These staffing difficulties have persisted for several years in spite of intensive efforts to make good our losses by means of a local training scheme under which the department has carried a very high proportion of students—at times in a ratio of 18 students to 34 inspectors. All the students are subject to an agreement to remain in the service of the Corporation for at least 2 years after qualification but as soon as that period elapses they commence to look for more rewarding posts elsewhere.

The following table summarises the work carried out by the inspectors during 1958. Figures for the previous year are also included for comparison.

TABLE V

SUMMARY OF INSPECTIONS AND SUBSEQUENT ACTION

	1957	1958
Complaints registered	8891	9237
<i>Inspections and Investigations, etc.—</i>		
Houses (under Public Health Act)	7810	7875
Houses (under Housing Acts)	1414	515
Houses (for overcrowding)	168	251
Passages, Areas, etc.	594	548
Keeping of Animals and other statutory nuisances	58	178
Premises infested with—Rats or Mice	2435	2743
Insect Pests	1986	2090
Milkshops and Dairies	774	512
Ice-cream Premises	415	488
Caravans	433	489
Drainage	2002	2059
Visits re infectious disease	3956	1722
Miscellaneous	7908	9885
Offensive Trades Premises	{ Day 3733	2995
	Night 1019	1010
Smoke Observations and Inspections	3011	3096
Pigsty Premises	2072	2442
Common Lodging Houses	{ Day 372	427
	Night 51	40
Seamen's Lodging Houses	{ Day 351	330
	Night 60	44
Houses-let-in-lodgings	{ Day 656	761
	Night 62	55
Factories—General and Sanitary Provisions	761	588
Means of escape in case of fire	232	137
Shops (Observations and Inspections)	8919	8468
Shops (Sunday Trading)	817	1130
Cinemas and Theatres	5	8
Bakehouses	265	166
Workplaces	285	214
Other Food premises	1018	473
Totals	53642	51739
<i>Revisits and Re-inspections—</i>		
Houses (under Public Health Act)	4499	4485
Houses (under Housing Acts)	202	636
Factories—General and Sanitary Provisions	348	105
Miscellaneous	9510	10306
Totals	14559	15532

TABLE V—*Continued*

<i>Notices served—</i>	1957	1958
Informal	4840	4490
Statutory (under Public Health Act)	2615	3349
Infringements of Byelaws at registered premises	145	124
Other Letters, Verbal Notices and Reminders	2415	2558
Factories Act, 1937—Power Factories	14	18
Non-power Factories	—	3
Shops	45	415
Smoke Nuisances (P.H. Act, S. 102)	87	96
Other Food premises	56	105
Totals	10217	11158
<i>Result of Action taken—</i>		
Floors relaid or repaired	565	613
Walls and Ceilings repaired	1526	1468
Dampness of walls remedied	872	925
Roofs repaired	1170	1234
Spoutings repaired	1104	1261
Fall-spoutings disconnected from drains	32	48
Windows repaired or made to open	797	660
Sinks provided	10	25
Premises cleansed and/or redecorated	—	1
Verminous houses disinfested	278	431
Verminous persons cleansed	77	88
Drains freed from obstruction	861	907
Drains relaid or repaired	125	171
Yards drained, paved or repaired	122	138
W.C.'s reconstructed or repaired, etc.	442	595
New W.C. pedestals or cisterns provided	225	330
Dustbins provided	2086	2270
Rat infested premises cleared	2406	2244
Smoke nuisances abated	74	87
Miscellaneous improvements effected and nuisances abated	1608	1771
Overcrowding abated	91	148
Noise nuisances abated	2	8
Contraventions remedied at registered premises	922	752
Totals	15395	16175
<i>Houses in respect of which defects were remedied—</i>		
By owners as a result of :		
Informal action	4286	4490
Notices under Public Health Act	1766	2335
By Local Authority in default of owners :		
Under Public Health Acts	1073	1420
Totals	7125	8245

TABLE VI

STATUTORY NOTICES SERVED DURING 1958

Act and Section under which served :	No. of Notices served	No. complied with (including those served in previous years and complied with in 1958)	No. of Notices complied with by the Corporation in default of owner (included in Col. (3))	No. not complied with at the end of 1958
(1)	(2)	(3)	(4)	(5)
<i>Public Health Act, 1936—</i>				
Section 24—Sewers	202	198	138	47
Do. (as amended by Section 49 of the Kingston upon Hull Corporation Act, 1952)	1175	1174	953	80
Section 39—Drains, etc.	229	231	58	47
„ 45—Water-closets ..	276	291	79	31
„ 56—Paving of : Yards ...	25	21	5	8
Courts ...	56	44	18	20
Passages ...	82	53	32	50
„ 75—Dustbins	160	136	29	29
„ 79—Removal of Noxious matter	1	1	1	—
„ 83—Cleansing of filthy or verminous persons ...	2	2	1	—
„ 93—Nuisances	911	1043	—	209
<i>Kingston upon Hull Corporation Act, 1952—</i>				
Section 51—Stopped-up drains	230	235	106	8
Totals	3,349	3,429	1,420	529

Legal Proceedings. 88 cases were referred to the Prosecuting Solicitor for legal action following failure of the owners to comply with statutory notices served under the provisions of the Public Health Act, 1936. 18 cases outstanding at the end of 1957 were also dealt with during the year. The number of cases in which legal proceedings were taken in 1957 was 57.

In 24 cases the owners carried out the work before summonses were issued, and summonses were withdrawn on payment of costs following satisfactory completion of work in 37 cases. Nuisance Orders were made in 20 other instances and the remaining 25 cases were awaiting Court Hearing at the end of the year.

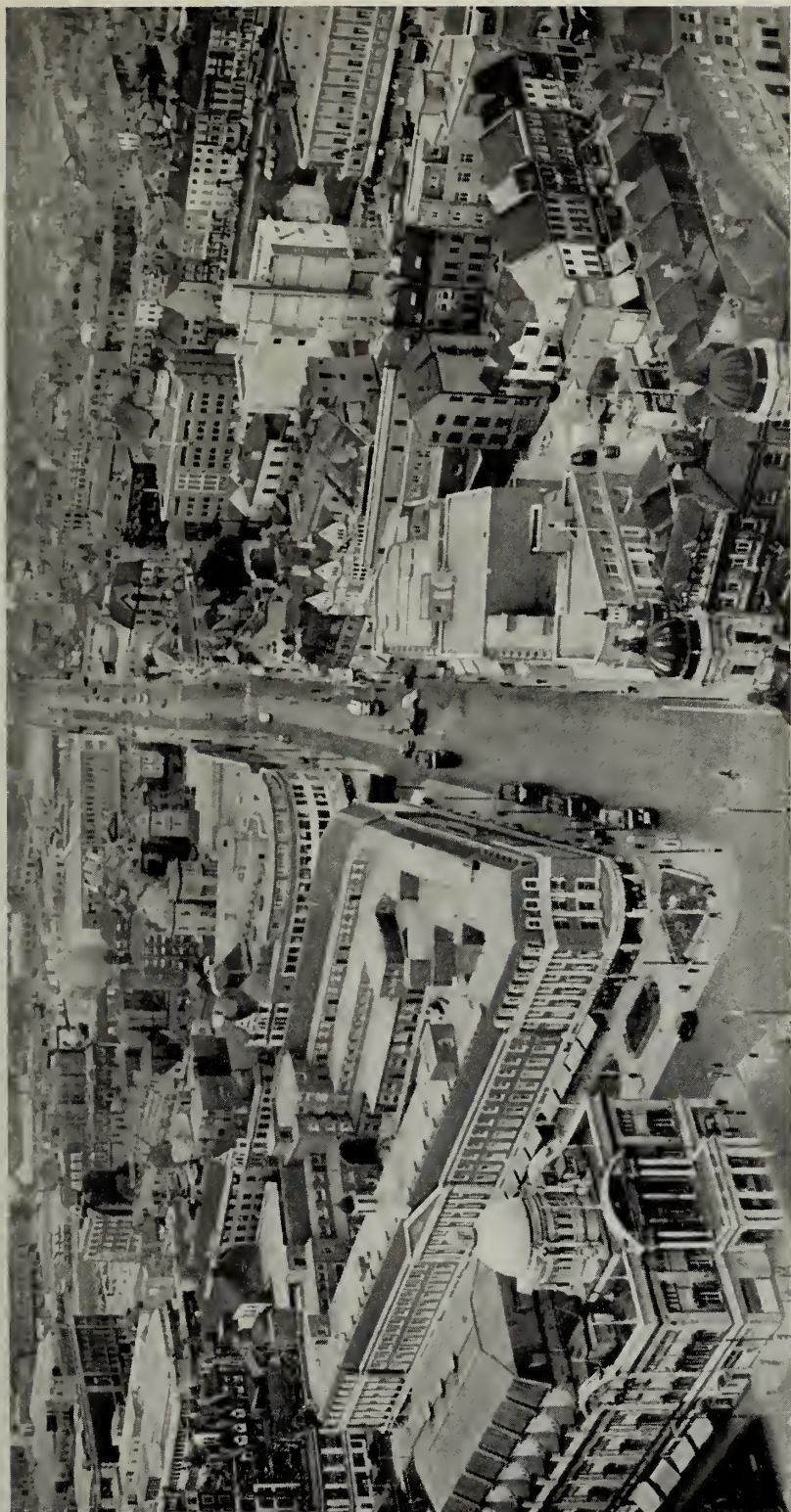
Pigeons, Nuisances from. The number of pigeons living on buildings within the City although still in the region of several thousand, continues to show a steady reduction.

Under the provisions of Section 48 of the Kingston upon Hull Corporation Act, 1930, the Council are empowered to trap pigeons believed to have no owners. The birds are caught alive in large traps which are replenished daily with food and water. During the year, 878 birds were trapped compared with 667 in 1957. Of the former number 177 were ringed birds and, after information concerning ownership had been obtained from the various Homing Unions, the owners were asked whether they desired the birds to be returned to them. A small fee was charged to cover the cost of transport and feeding during the time the birds had been in the possession of the Local Authority. Since 1951, 9,962 pigeons have been caught, and it would appear that there are small infestations on many buildings. Unfortunately there is now a tendency for the birds to spread on to the new premises in the City centre and efforts are being made to prevent this.

ATMOSPHERIC POLLUTION

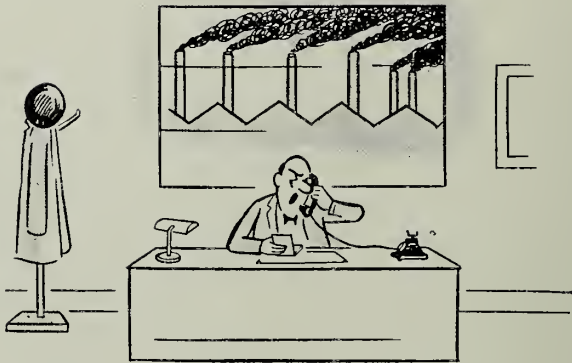
The Clean Air Act, 1956, was brought into operation in two stages by means of "Appointed Day" Orders. The first provisions operated from the 31st December, 1956, and the remainder came into operation on the 1st June, 1958, although there are still certain sections which cannot be used until the Minister makes regulations containing specific requirements—e.g., Section 4 relating to smoke density meters and Section 7 concerning the measurement of grit and dust emitted from furnaces.

The first three Smoke Control Orders made by the Council under their new powers were confirmed by the Minister of Housing and Local Government on the 31st October, 1958, and will come into operation on the 1st June, 1959. Although the making of the Orders was announced in the prescribed manner by notices in the Local Press and posters exhibited throughout the areas affected, no objections were raised by owners or occupiers of premises and consequently the Minister did not deem it necessary to hold a local inquiry. All the Orders were confirmed without any material amendments—only two minor changes were made in the setting-out of the schedule relating to the central area.



KINGSTON UPON HULL No. 1 (CENTRAL) SMOKE CONTROL AREA

The top and bottom edges of this photograph reach to the northern and southern boundaries of the area but the area extends to Midland Street in the west and Wilberforce Drive in the east. (*Copyright Hull Daily Mail*)



"Hello—Works? There's one of these Smoke Abatement chaps . . .



. . . just coming in to see me . . ."

Reproduced by permission of "PUNCH"

	No. 1 (Central) Area	No. 2 (Longhill Estate) Area	No. 3 (Greatfield Estate) Area	Total
Area in acres	74	228	258	560
Premises Included—				
Industrial	5	—	—	5
Commercial	527	18	18	563
Dwellings	74	2,295	2,359	4,728
Other	76	3	6	85
Annual tonnage of coal to to be replaced	445	5,400	2,938	8,783
Exempted buildings (pending demolition)	12	—	—	12
Exempted fireplaces (oil or mechanical stokers)	32	3	6	41
Estimated cost of adaptations— dwellings	£767	—	—	£767

NOTE—In the case of the housing estates, the numbers of buildings include some not yet completed but the annual tonnage of coal to be replaced refers to present consumption.

As soon as the Council received notification that these Orders had been confirmed, the Medical Officer of Health was instructed to submit proposals for the creation of further areas.

The following is a summary of work carried out by the smoke inspectors during the year.

Observations and inspections :—

No. of half-hour smoke observations	1563
Smoke nuisances observed	86
Observations re grit and dust	298
Grit and dust nuisances observed	3
Inspections of premises	1446
Other visits in connection with smoke control areas	3961

Action taken :—

Verbal cautions given	56
Written cautions and letters	40
Statutory notices served	1
Legal proceedings instituted	1

Result of action :—

No. of nuisances abated	57†
No. of nuisances outstanding but receiving attention at end of year	61

† including cases outstanding at the end of 1957.

Improvements carried out at the request of the Department :—

Alterations to boilers, furnaces or chimneys	....	....	....	....	50
Improved stoking of fuel	....	....	....	....	37
Arrangements for arresting dust and grit	....	....	....	....	7

Proposals concerning new boiler plant :—

No. of plans examined	....	....	....	....	35
No. passed without alteration	....	....	....	....	29
No. requiring alteration before approval					
re chimneys	....	....	....	....	3
re stokers and fuel	....	....	....	....	3
Other notifications received	....	....	....	....	29

In most cases the above mentioned plans had been submitted to the City Architect under the building Byelaws and, in accordance with long-standing practice, were examined by inspectors of the Health Department for matters covered by the Factories Acts, Clean Air Act, etc. When any unsatisfactory features were noted they were brought to the attention of the private architect concerned and rectified. No plans were considered for prior approval under Section 3(2) of the Clean Air Act, 1956.

88 complaints were received and upon investigation 4 of these could not be substantiated. The justifiable complaints concerned smoke from metallurgical works (4), brickworks (3), steam boiler plant (14), miscellaneous smoke nuisances (49), nuisances from dust and grit (14).

The legal proceedings referred to above were in respect of a hand-fired boiler furnace at a seed crushing factory. The chimney was seen to emit dark smoke continuously for four minutes ten seconds, and for 3 minutes 16 seconds of this period the density was equal to Shade No. 4 on the Ringelmann Chart. A letter of caution had been sent to the firm three months earlier concerning a similar offence. On finding the case proved, the Stipendiary Magistrate imposed a fine of £5. He had been told that between the date of the offence and the hearing of the case, the firm had carried out a number of improvements suggested by N.I.F.E.S., and there had been no recurrence of the nuisance.

In my report for 1957, I referred to the nuisance caused by coal-fired steam cranes operating on wharves along the banks of the River Hull. These continued to receive attention from the smoke inspectors and two were changed over to oil-firing, one was replaced by diesel, and three were being tried with a mixture of coke and coal. This trouble, is of course, confined to old plant, most of the post war installations being electric or diesel. Similar vertical boilers

used by contractors working on the deep drainage scheme were also the subject of complaints, especially when working close to the fronts of good class residential property. One firm was cautioned on several occasions and kept their boilers running mainly on coke. At the year end, consideration was being given to the possibility of replacement by diesel.

Railway smoke has, in the past, accounted for a high proportion of the atmospheric pollution in this city and it is very pleasing to be able to report that this part of the problem is diminishing rapidly. The amount of coal consumed by railway locomotives based on Hull has fallen from 3,500 tons per day in 1949 to 1,560 tons per day in 1958. British Railways estimate that perhaps 500 tons of this reduction is due to a falling off in trade, but the remainder is the result of the introduction of diesel trains. As from 1st December, 1958, all steam locomotives were transferred from Springhead Motive Power Depot and the steam heating boilers at that depot, which also supply steam for the generating set, are now working on a mixture of coke and best coal, with consequent reduction of smoke ; before next winter they will be redundant and replaced by coke-fired boilers. Conversion to diesel is also well advanced at the Botanic Gardens Depot (which has long been a source of trouble due to grit emission.) The number of diesel passenger trains running daily has increased to 151 and there are 32 diesel shunting locomotives working in the district, the last mentioned being particularly welcome because shunting and idling steam locomotives are notorious for the amount of smoke produced in a limited area around the sidings and docks.

The Alkali, &c., Works Order, 1958, which came into operation on the 1st June, had been awaited with considerable interest because its purpose was to extend the range of works controlled by the Ministry's Alkali Inspectors, by transferring to their supervision certain types of factories previously dealt with by local authorities. It is now possible to see the result of this transfer as a list of all registered works in the city has been supplied by the Ministry. The list comprises only 12 premises, several of which had already been registered before the changeover. The principal additions are the electricity power station, the hot blast cupolas of Ideal Boilers Ltd., and the intermittent brick kilns in Anlaby Park Road South. In none of these cases will the Ministry's inspector be able to do any better than the local authority : but he will take longer to get on the spot if things go wrong. Cement dust has been a government responsibility for many years and the result is not encouraging.

On the 6th June, 1958, to mark the coming into operation of the industrial provisions of the Clean Air Act, a one day conference was held in the Guildhall. It was sponsored jointly by the Kingston upon Hull City Council and the Hull Productivity Committee and was attended by representatives of all the principal local firms.

The City Analyst has supplied the following information from his records of atmospheric pollution during 1958.

<i>Deposit Gauges</i>					<i>Tons per Square Mile per Month</i>		<i>Total (in tons) per sq. mile for year</i>
Gauge placed at :—					<i>Maximum</i>	<i>Minimum</i>	
(1)	Pearson Park	....	....	....	23.7	8.3	201
(2)	Springhead Golf Course	....	....	....	18.5	4.3	133
(3)	Dunswell Waterworks	....	....	....	23.9	3.9	129

Smoke. The total weight of smoke collected during the year from the atmosphere outside the laboratories was 3.2 milligrammes per cubic foot of air, as compared with a figure of 3.0 for 1957.

Sulphur Gases. The average weights in milligrammes of sulphur trioxide collected per day on chemically treated cylinders each having an exposed surface of 100 square centimetres were as follows :—

<i>Year</i>			<i>Kingston Square</i>	<i>Pickering Park</i>	<i>Sutton Road</i>	<i>Wawne</i>
1957	....	....	1.15*	1.07	1.68	0.67
1958	....	....	1.36	1.17	1.49	0.52

* July–December only.

NOISE NUISANCES

Section 60 of the Kingston upon Hull Corporation Act, 1952, provides (briefly) that any excessive, unreasonable or unnecessary noise which is prejudicial to health or a nuisance shall be a statutory nuisance for the purposes of the Public Health Act, 1936.

During the year, 18 complaints of noise nuisances were received and 92 visits were made by the inspectorial staff concerning these cases and others which came to their attention in the course of routine work. Three verbal cautions were given and improvements were effected in 4 cases.

PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS AND REGULATIONS

Offensive Trades. The number of trades classified as "offensive" and operating in the City at the end of 1958 was 16, involving 114 premises, and including 95 premises in respect of which the Corporation's consent operates for a limited period. The following table shows the number of businesses classified according to the trade carried on :-

	1958
Bone Boilers	4
Fat Melters	4
Fat Extractors	2
Tallow Melters	3
Blood Driers	2
Fish Curers	54
Rag and Bone Dealers	20
Gut Scrapers	2
Tripe Boilers	2
Fish Manure Manufacturers	8
Fish Oil Manufacturers	5
Glue Maker	1
Leather Dresser	1
Fellmonger	1
Soap Boilers	3
Tanners	2
	114

Kingston upon Hull is the largest fishing port in the United Kingdom and some of the trades scheduled above deal with by-products of the fishing industry. Other trades, such as fish meal manufacturing, have been developed on an extensive scale, and although this has not been formally declared an offensive trade under the provisions of the Public Health Act, and is therefore not included in the above table, it is undoubtedly the type of business which can give rise to nuisances from effluvia if there is the slightest relaxation in supervision at all stages of production. It is difficult to record the full extent of such work, especially as large quantities of fish for processing are brought into the city by road and rail from other ports, but one factory alone is able to deal with as much as 800 tons of raw fish daily, producing therefrom oil, meal, glue, manure, etc.

All premises used for offensive trades are subject to systematic day and night observations. During 1958, 2,995 day and 1,010 night inspections were made of these premises and other places where effluvia nuisances might arise. 7 complaints were received from the general public and prompt attention was given in each case. 12 complaints of obnoxious smells from other causes were also received. Thirteen informal notices were served and there were 25 verbal cautions and follow-up letters.

As a result of representations made by the Department, structural improvements were effected in 36 cases and improved operations to minimise possible nuisances in 25. Eleven plans of new premises and plant were examined. 76 contraventions of the Bye-laws were remedied.

Pig Keeping. The number of premises registered as complying with the local bye-laws was 197, provided with 752 sties. All such premises are subject to regular inspection.

Common Lodging Houses. These are governed by local bye-laws which have been designed to ensure good management of such houses, the taking of precautions in cases of infectious disease, the promotion of cleanliness, the limiting of the number of lodgers per room, and the proper separation of the sexes. At the end of the year there were 34 registered common lodging houses in the City containing 212 bedrooms or cubicles with accommodation for 552 single lodgers and 28 married couples.

Seamen's Lodging Houses. The comparatively large number of seamen's lodging houses in the City cater for the needs of the many seafaring men who necessarily frequent the port. The houses are licensed and regulated by the local bye-laws originally made under the Merchant Shipping Act to safeguard the interests of seamen. On the whole the houses are well conducted and give rise to no special problems. Seamen of the present day are well paid and their lodging houses compare favourably with most moderately priced hotels. It is, however, necessary to make frequent inspections, mainly to ensure the proper keeping of records and the maintenance of a good standard of hygiene. A number of the smaller houses cater almost wholly for seamen of a particular nationality such as Arabs, Indians, Somalis, etc., but all the large houses, including those run by missionary bodies, provide accommodation for any nationality. The number of these houses on the register was 21 containing 554 bedrooms or cubicles with accommodation for 741 seamen.

Factories Act, 1937. The provisions of the Factories Act are enforced partly by H. M. Inspectors of Factories, and partly by local authorities. In factories where mechanical power is used local authorities enforce the requirements of Section 7 of the Act, and the Sanitary Accommodation Regulations, 1938, to ensure that suitable and sufficient sanitary accommodation is provided and maintained. In factories where mechanical power is not used, local authorities deal with sanitary accommodation and also cleanliness, overcrowding, temperature, ventilation and drainage of floors. In addition, factories of all classes are subject to the general public health law with regard to nuisances, etc., and factories processing food are subject to various provisions of the Food and Drugs Act.

The local authority is required by the Act to keep registers of all factories situated within their district. At the end of the year there were 349 non-power and 1,466 power factories on the Corporation's Register. 588 inspections, including 105 re-inspections, were made of factories and 57 contraventions were found. The infringements mainly concerned unsatisfactory conveniences.

Under the provisions of Section 34 of the Factories Act, 1937, it is the duty of occupiers of certain factories to make application to the local authority for a certificate to the effect that their premises are provided with sufficient means of escape in case of fire. During the year 18 applications for certificates were received and 25 certificates were issued. Additional or improved means of escape were found to be necessary at 6 factories and the number put in order during the year was 10.

Plans for 132 new factories and alterations to existing factories were submitted for examination. Five such plans did not show sufficient means of escape in case of fire and in 5 other cases suitable sanitary conveniences were not indicated. In all cases the owners or architects were notified and undertook to comply with the requirements of the Authority.

Homework. Section 110 of the Factories Act requires occupiers of factories carrying out specified trades who employ workmen or contractors working outside the factory to keep in prescribed form and manner lists showing the names and addresses of all such persons. These persons are known as outworkers and a list of them must be sent to the District council during the months of February and August in each year. The main purpose of this Section of the Act is to ensure that the health of persons so employed is safeguarded and the Local Authority has power to forbid homework being carried on at premises where there is a case of infectious disease. This power is particularly applicable to trades dealing in wearing apparel and the Minister has power to include other types of work if he considers this to be desirable.

This Authority has on its register 63 firms who employ a total of 257 outworkers, 129 of whom are engaged in the making, cleaning, alteration, etc., of wearing apparel. Periodical inspections of their premises were carried out during the year.

All other provisions of the Factories Acts are enforced by H.M. Inspectors of Factories who are employed by the Ministry of Labour and National Service. These inspectors work in close co-operation with the Public Health inspectors of local authorities.

The following summary gives details of inspections made under the Factories Act and defects found :-

	<i>No. of Inspections</i>	<i>Notices Served</i>	<i>Verbal Cautions</i>
Factories (with mechanical power)	405	18	} 41
Factories (without mechanical power)	78	3	
Works of Building	17	—	
Work of Engineering	6	—	
	506	21	
	—	—	

The above figures include 137 inspections concerning means of escape from fire. (Visits to Bakehouses are recorded elsewhere.)

SUMMARY OF DEFECTS FOUND :

<i>Details</i>	<i>No. of Defects</i>	
	<i>Found</i>	<i>Remedied</i>
Want of cleanliness (Section 1)	4	3
Ineffective drainage of floors (Section 6)	1	2
Other Nuisances (P.H.A. 1936)	43	32
Sanitary Accommodation (Section 7)—Unsuitable or defective	44	38
Other offences against the Act (excluding outworkers)	8	9
	—	—
TOTALS	100	84
	—	—

Shops Act, 1950. This Act controls hours of closing, conditions of employment of shop assistants and Sunday Trading.

At the 31st December, there were 5,186 occupied shops on the register in which 3,719 males and 7,215 females were employed. 713 shops were inspected and 577 contraventions were found, principally in relation to failure to keep prescribed records and notices ; 290 notices were served, 15 letters of caution sent and 110 verbal cautions given. On re-visits being made, 524 contraventions had been remedied and the remainder were receiving attention. 57 plans of shops or other premises were submitted for examination in the light of the Shops Acts and one of these was found to require amendment.

On week days, 6,625 observations were made of shops, 104 of which were found to be open after the prescribed closing hours. A further 1,130 inspections were made of shops open on Sundays, at 75 of which contraventions were found.

At the end of the year there were 965 shops which opened for the purpose of trade on Sundays, including 7 shops occupied by persons observing the Jewish Sabbath.

One prosecution took place under Section 47 of the Shops Act, 1950, resulting in a fine of £5 on each of two charges.

Rag Flock and other Filling Materials Act, 1951. This Act is designed to secure the use of clean filling materials in upholstered articles and other articles which are stuffed and lined. It requires registration by the Local Authority of all premises (with certain exceptions) where there is carried on any form of upholstering, and the licensing by the Local Authority of any premises at which rag flock is either manufactured or stored prior to delivery to registered premises. The Regulations of 1951 prescribe standards of cleanliness for each kind of filling material to which the Act applies and also the form in which records must be kept by the occupier of both registered and licensed premises.

At 31st December, 1958, 19 premises (occupied by 18 persons or firms) were registered by the Local Authority and 4 premises were licensed for the storage of rag flock. There is no establishment in the City where rag flock is manufactured. All these premises were systematically inspected during the year and no contraventions were discovered.

40 samples of filling materials to which the Act applies were taken and all but one (in which case a communication was addressed to the occupier) were found to conform to the standard of cleanliness prescribed by the Regulations.

Tents, Vans and Sheds. The licensing provisions of the Public Health Act, 1936, with regard to tents, vans and movable dwellings do not operate in the City, the subject being dealt with by special powers under Section 45 of the Kingston upon Hull Corporation Act, 1930. In addition, there are local bye-laws for regulating the cleanliness and sanitary conditions of tents, vans or sheds used for human habitation, for preventing the spread of infectious diseases and for the prevention of nuisances. The Act provides amongst other things, that no tent, van, shed or similar structure used or intended to be used for human habitation shall be placed or kept on land situate within the City without the previous approval of the Corporation. Unfortunately there are two serious weaknesses in the law—it does not apply to caravans unless they are used as dwellings for an unbroken period of at least 3 months, and it excludes travelling showmen and stallholders. There is no definition of a travelling showman or stallholder and the exclusion apparently holds good during periods when they are not carrying on their normal occupation.

During the year it was found necessary to prosecute two persons for occupying caravans without proper sanitary accommodation and nuisance abatement

orders were made in each case. One particular street with numerous vacant sites due to bomb damage appears to attract a continual procession of caravan dwellers and this necessitates many inspections in order to obviate nuisances.

RENT ACTS

Applications for Certificates of Disrepair under the 1957 Act continued to take up a good deal of time, but during the last quarter of the year there was a gradual falling off in the number of applications received and it appears that a "normal" level has been reached.

The total number of applications during the year was 699, compared with 606 for the period July–December, 1957.

The difficulties encountered by many tenants in the early days of the Act, arising from their inability to understand the complicated legal procedure or to fill in some of the numerous forms involved, were less noticeable and the inspectorial and clerical staffs were able to meet all the demands made.

In addition to the applications for Certificates and cancellation of Certificates, many landlords and tenants availed themselves of the opportunity to apply for a Form P, i.e., a Certificate as to the remedying of defects specified in a landlord's undertaking. These Certificates can be applied for after the expiration of six months from the date of a landlord's undertaking. On receipt of an application the premises are visited by the District Inspector who reports whether all the defects covered by the landlord's undertaking have been remedied. If the work is not completed the legal position then becomes the same as if a Certificate of Disrepair had been issued.

The following statement summarises the work carried out during the year :

Applications for Certificates of Disrepair	....	....	....	....	....	699
Notices to Landlord of Proposal to issue Certificate—						
In respect of all defects	....	....	....	....	....	315
In respect of some defects	....	....	....	....	....	477
Undertakings accepted	....	....	....	....	....	572
Undertakings refused	....	....	....	....	....	15
Certificates of Disrepair issued	....	....	....	....	....	233
Applications for cancellation of Certificates	....	....	....	....	....	153

Objections by tenants to proposed cancellation—

Sustained	....	....	....	....	....	....	....	....	53
Not sustained	....	....	....	....	....	....	....	....	2
Certificates cancelled	....	....	....	....	....	....	....	....	101

Applications for Certificates as to remedying of defects—

From Tenants	....	....	....	....	....	....	....	....	106
From Landlords	....	....	....	....	....	....	....	....	69

Certificates issued to—

Tenants, defects remaining unremedied	....	....	....	....	....	....	....	....	98
Tenants, all defects remedied	....	....	....	....	....	....	....	....	8
Landlords, defects remaining unremedied	....	....	....	....	....	....	....	....	30
Landlords, all defects remedied	....	....	....	....	....	....	....	....	39

It may be noticed that the above figures do not balance. This is due to the carry over from one year to another and the fact that the procedure often takes more than six months.

Four Certificates of Disrepair issued under the Housing Repairs and Rents Act, 1954, were cancelled during the year on application by the landlord. In addition, an attempt was made to clear up all the outstanding Certificates of Disrepair issued under the Act of 1954.

The District Inspectors visited the 69 premises concerned and found the position to be as follows :

Repairs completed	....	....	....	....	....	....	....	....	16*
Repairs commenced but unfinished	....	....	....	....	....	....	....	....	31*
No repairs done	....	....	....	....	....	....	....	....	4*
Now Owner/Occupied	....	....	....	....	....	....	....	....	11
New tenant—house decontrolled	....	....	....	....	....	....	....	....	3
Houses demolished	....	....	....	....	....	....	....	....	2
House vacant	....	....	....	....	....	....	....	....	1
House acquired by Corporation	....	....	....	....	....	....	....	....	1

* In these 51 cases letters were sent to the landlords in November suggesting it was in their own interests that the Certificates of Disrepair be cancelled because a Certificate issued under the 1954 Act remained enforceable (as regards repairs) under the new legislation. As a result of this, 18 applications for cancellation of Certificates were received by 31st December.

Hull Fair. During the period of the Fair, the vans on the fairground and in the vicinity were visited daily by the Public Health Inspectors who took a census of the occupants and enquired as to the state of their health. Comparative figures of the number of vans and occupants for the past three years are set out below :

<i>Year</i>					<i>No. of</i>	<i>Occupants</i>	
					<i>Vans</i>	<i>Adults</i>	<i>Children</i>
1956	....	....	....	....	314	659	203
1957	....	....	....	....	313	584	240
1958	....	....	....	....	315	666	310

Day and evening observations were carried out as usual. Cautions were given to individuals when contraventions of the Food Hygiene Regulations occurred and also in regard to depositing refuse on the public footpath.

A complaint was received from the occupants of houses in Southburn Avenue regarding persons from the caravans on Spring Bank West using the railway sidings as toilets. The occupiers of the caravans were interviewed and agreed to provide pail closets for the Cleansing Department to empty.

One case of infectious disease (dysentery) was reported and the relevant information was obtained ; bacteriological specimens taken from the contacts gave negative results.

The provision of the new roads on the fairground greatly reduced the dusty conditions experienced in the past and also eliminated flooding during rainy periods.

The Lodging House Inspector visited 537 houses in the streets adjacent to the fair and found 29 houses providing temporary accommodation for 66 lodgers. There were no contraventions of the Public Health Act or Local By-laws and the houses were found to be clean and well conducted. Night visits were made to the houses and the accommodation provided was found to be adequate. In addition to this temporary accommodation, 4 registered common lodging houses and 2 licensed seamen's lodging houses were found to be accommodating a further 89 men employed in connection with the fair.

95 Diesel and 2 Petrol generating units were assembled on the fairground, compared with 120 last year, and solid smokeless fuel was used by the only steam locomotive. There were 13 fish and chip saloons, 12 of which burnt solid smokeless fuel and one a mixture of coke and coal ; 44 refreshment stalls, 43 of which burnt calor gas and one solid smokeless fuel ; 4 chestnut stalls, all of

which burnt coke. It was necessary to serve one informal notice and give 17 verbal cautions, mainly in respect of height of exhausts; all were complied with. A total of 533 inspections and visits were made by the Smoke Inspectors.

Last year persistent complaints of smoke were received by the Department from residents surrounding the Evans Square site. In close liaison with the City Engineer's Department, the storage wagons were arranged to act as a baffle between the houses and the living vans, the latter being confined to the centre of the site. 27 letters were given to the caravan dwellers drawing their attention to a potential smoke nuisance, both to residents and themselves, owing to congested conditions, and requesting their co-operation. Subsequent observations revealed that the showmen co-operated fully and no complaints were received by the Department from the Evans Square residents.

The Sampling Officer under the Food and Drugs Act took 29 samples of foodstuffs at the fairground and submitted them for analysis. The commodities included ice-cream, ice-lollies, candy apples, brandy snap, rock, potato crisps, sweets and other confections. Five samples of ice-cream and four ice-lollies were submitted for bacteriological examination.

The Public Analyst gave satisfactory reports on all samples.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Rats and Mice Destruction. The importance of the destruction of rats and mice is now recognised by all Local Authorities and by the Central Government. Apart from consuming and damaging large quantities of food stored for the nation's use, rats do untold damage to the structure of buildings by gnawing woodwork, water pipes, etc., and often burrow beneath buildings to the extent of undermining the foundations. Moreover, they are an important factor in the spread of certain diseases, some of which are fatal to human beings. Kingston upon Hull has a great many dock-side warehouses, grain stores, flour mills, etc., which are particularly liable to attract and harbour rats. The department employs 9 rodent operatives for dealing with rats in houses and on business premises.

In the case of dwelling houses the services of the rodent operatives are provided free of charge, the cost being borne equally by the General Rate Fund and the Ministry of Agriculture, Fisheries and Food. At the same time the Public Health Inspectors enquire into the cause of the infestation and supervise the carrying out of any structural repairs and improvements necessary to make premises rat proof: they also deal with any special conditions likely to attract or harbour rats, such as the keeping of poultry.

Business premises are dealt with on a different basis, a charge being made to cover the cost of labour and materials. This part of the scheme is therefore self-supporting and no cost is borne by the rates or Exchequer contributions. The methods of poisoning used are in accordance with the recommendations of the Ministry of Agriculture, Fisheries and Food.

The following table shows the number of rats and mice killed, classified under the types of property affected.

TYPE OF PROPERTY	No. of rodents killed	No. of properties affected	METHODS OF DESTRUCTION	
			Method	Rodents killed
Dwellinghouses	14,762	1,664	Trapping	45
Business premises	7,025	384	Poisoning	24,323
Local Authority property .. (excluding houses)	2,525	139	Gassing	29
Agricultural Property	85	2		
TOTALS	24,397	2,189		24,397

Eradication of Insect Pests. During the year, the Department was called upon to take steps for the eradication of bugs at 3 council houses, 36 private houses, and 3 business premises. Disinfestation for fleas was undertaken at 13 council houses, 67 private houses, one school and 5 other premises. 275 treatments, including 7 at business premises and 6 at schools, were undertaken for infestation by beetles and cockroaches.

31 infestations of flies, ants, moths, earwigs and clover mites were also dealt with. Of 11 cases of woodworm, treated by the Department's workmen, 2 were at council houses, 9 at private premises.

Scientific Aids to Public Health Inspection. The first public health inspectors of more than a hundred years ago ("inspectors of nuisances") required little more than good eyesight, a keen sense of smell, and a robust physique in order to detect and deal with the grossly insanitary conditions which then prevailed. The problems of today are very different: standards are infinitely higher and an inspector's range of duties has been extended into many new fields. What was good enough for the Citizen and the Law Courts of 1848 would not be acceptable today. Consequently, the department is always

trying to attain the highest standard of efficiency in its work and loses no time in adopting any new scientific device which leads to greater accuracy of inspection or saves time. Among the instruments acquired during 1958 are the following :

Track Locator. This instrument was purchased from the Corporation's Telephone's Department and enables an inspector to trace a drain pipe without excavating. It has the appearance of a mine detector, such as the army used during the war, and can follow the twistings and turnings of old drains even beneath concrete paving. It can also locate the actual point under ground where a blockage has occurred, thereby saving much time and money for the Corporation and for property owners.

Protimeter. This instrument measures the degree of dampness in a wall, floor, or other part of a building and has obvious advantages when a landlord disputes whether a house is damp, especially if there is any likelihood of legal proceedings in respect of the property. It is much more satisfactory than saying a house is "slightly " damp or "very " damp.

Telesmoke. This is an instrument designed in conjunction with the Department of Scientific and Industrial Research to facilitate observation of chimneys under the Clean Air Act. It has the appearance of a telescope and incorporates shaded sections of glass which enable the inspector to match the smoke against shades corresponding with those on the Ringelmann chart.

Photography. Considerable use is made of photography, especially by the housing inspectors and smoke inspectors. An additional camera was purchased during the year and improved facilities were provided in the department's dark room.

Smoke Filter. An additional smoke filter was obtained and installed in the centre of the Longhill Housing Estate. This instrument incorporates an electric motor which operates day and night, drawing air first through a filter paper and then through a meter. By this means it is possible to determine the amount of smoke in a measured volume of air and to keep a daily record of these measurements. The reason for installing this instrument at Longhill was to obtain a record of atmospheric pollution during the winter of 1958/9 and compare it with the following winter when the estate will be subject to a Smoke Control Order. The City Analyst has for many years operated other measuring instruments in different parts of the city and the public health inspectors have carried out petri-dish surveys.

Smoke Stain Reflectometer. A photo-electric instrument which eliminates the chances of human error in matching smoke filter stains.

Microsol Mist Generator. An electric appliance for dispersing liquid insecticides in mist-like form over a large area, e.g., in large warehouses and factories.

HOUSING AND SLUM CLEARANCE

1958 was the third full year of the post-war slum clearance programme.

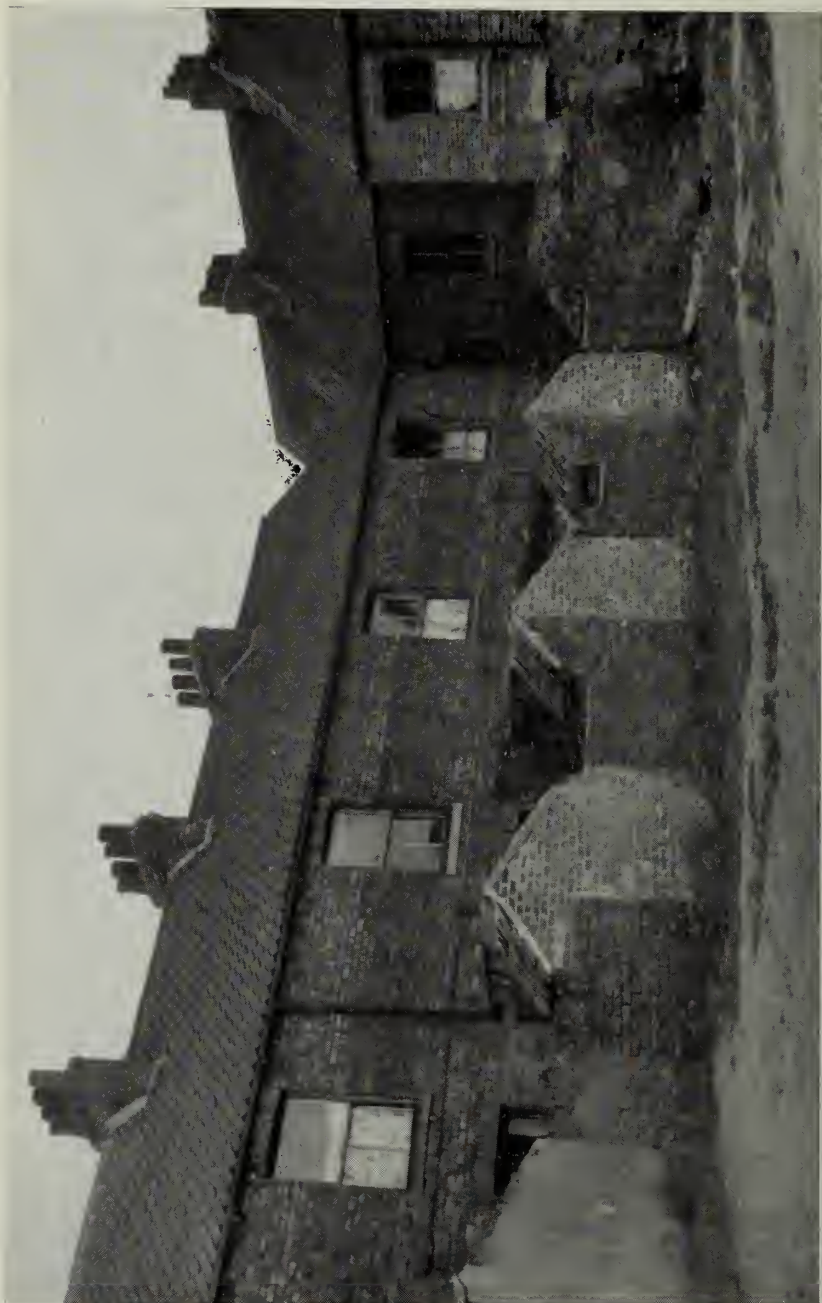
The table below gives details of the areas represented and the procedural stage reached in each case.

Title of Area	Date of Confirmation	No. of Houses		No. of Families	
		Total	Demolished	Rehoused	To be Rehoused
Edward's Place, Clearance Order	15/11/56	7	7	5	None
Cogan Street, Clearance Order	18/2/57	34	34	30	„
Graham's Row, Clearance Order	6/3/57	43	43	37	„
Marsh Street, Clearance Order	30/4/57	22	22	22	„
English Street, Clearance Order	18/7/57	76	76	75	„
Spring Street, Clearance Orders 3 and 4.	25/7/57	52	52	53	None
Walcott Street, Compulsory Pur- chase Order No. 1	31/3/58	122	122	125	„
South Parade, Declaration of Unfitness Order	20/10/58	39	38	38	1
Marmaduke Street, Compulsory Pur- chase Order (Part for " Deferred demolition ")	19/12/58	310	—	—	312
Nornabell Street Compulsory Pur- chase Order	Awaiting confirmation after Public Local Inquiry	411	—	—	423
Campbell Street, Clearance Order		119	—	—	121
Providence Row Nos. 1 and 2	Awaiting Public Local Inquiry	113	—	—	117
Walker Street, Nos. 1 and 2	Awaiting Public Local Inquiry	171	—	—	182



CLEARANCE AREAS

A row of "blind back" houses in the Nornabell Street Area. Note absence of through ventilation, lack of rear access for removal of refuse and delivery of coal, etc., and general dilapidation of roofs and walls.



CLEARANCE AREAS

Inadequate back yards and absence of rear access to houses dealt with in Barnsley Street. The roofs were renewed following war damage.

The Council's programme was submitted to the Ministry in 1955, and at that time it was proposed to clear around 15,000 properties in the next fifteen years, 3,000 of these in the first five years. This programme represented the Council's concern to resume and improve on their pre-war programme.

During the eight years prior to World War II thirty-five Clearance or Compulsory Purchase Orders were made and confirmed, comprising over 3,000 properties, and at the outbreak of war a large programme of slum clearance was being considered by the Housing Committee. During the war enemy action caused a loss of 7,598 dwellings—8% of the city's housing units—and as many of those were not of a substandard character, the post-war programme was not only held back but required considerable amendment.

In the three years 1956-58 inclusive, 1,519 properties were represented to the Committee by the Medical Officer of Health, and by December 31st, 1958, 394 of these properties had been demolished and the families rehoused. Ministerial confirmation of the orders was still needed for the remaining 1,425.

Individual Unfit Properties. Although as previously stated, no full scale programme of slum clearance could be commenced before 1955, individual unfit properties have been dealt with at an average of over 50 per year since 1950. Action taken during 1958 is summarised in the following table.

Represented to Committee—

For demolition	...	...	...	...	...	48	
For closure	...	...	...	...	...	14	
Certificates of Unfitness (Local Authority property)	...	...	...	...	...	19	
							—
					Total	81	Dwellings
							—

Orders made—

For demolition	...	...	...	...	...	65	
For closure	...	...	...	...	...	17	
							—
					Total	82	Dwellings
							—

The latter total includes houses represented towards the end of 1957.

Overcrowding. Immediately prior to the last war the statutory overcrowding figures had been reduced by formal and informal action to less than 1% of the families in the City.

Facilities have not been available for carrying out any detailed post-war survey for this purpose but from general observation and spot checks it would appear that the present day figure is certainly not less than the 3% revealed in a full survey made in 1936.

The following table gives a summary of action taken during the year as a result of routine inspections or following cases being brought to the notice of the department.

Complaints received	117
Found to be overcrowded	60
Statutory overcrowding abated	107

Rehousing of displaced tenants from slum clearance areas will reduce the problem of overcrowding to a certain degree, but the whole matter could be tackled more satisfactorily if the Government's subsidy was also available for the abatement of overcrowding as it was in 1938.

New Houses. The City Architect has supplied the following information with regard to the erection of new dwellings in the City during 1958 :

Temporary or Permanent	With State Assistance		Without State Assistance		TOTAL
	By Local Authority	By Others	By Local Authority	By Others	
Permanent (New)	1,108	—	—	112	1,220



OVERCROWDING

This small bedroom, 12' x 13', contained 1 double bed, 2 single beds and a cot, and accommodated two boys aged 12 and 5, and five girls aged 17, 11, 9, 8 & 6 years.

FOOD AND DRUGS

Considerable time is devoted to the sampling of food and drugs with the object of checking whether they are of the nature, substance and quality required ; also (in the case of food) to ascertain whether it is free from harmful bacteria. Premises where food is prepared, stored or sold are subject to frequent inspections so as to maintain a good standard of hygiene with regard to structure, equipment and method.

Milk Supply. Milk has always received special attention because it is not only one of our most valuable foods but is also one of the most dangerous. Infection may be derived from the cows, from persons milking the cows, from persons handling the milk or milk vessels at any stage of the journey from farm to house, or from dirty plant or receptacles. Once it has become infected it forms an excellent medium for the growth of many organisms. Milk is also a convenient subject for adulteration—either by skimming the cream or adding water. It is therefore not surprising that a considerable amount of legislation is designed to safeguard our milk supplies throughout all stages of production, processing and distribution.

The amount of milk consumed daily in the City in 1958 was 29,200 gallons which represents an average daily consumption per person of 0.77 pints. This shows a slight fall over the 1957 figures of 30,200 gallons and 0.80 pints per person.

The following table shows the daily consumption of the different grades of milk during the last quarter of the year under review :—

	<i>Amount</i> (gallons)	<i>Percentage</i>
T.T. Farm Bottled	700	2.7
T.T. Pasteurised	2,500	8.5
Pasteurised	15,500	53.0
Sterilised	10,500	35.8
	<hr/>	<hr/>
	29,200	100.0
	<hr/>	<hr/>

There are 6 milk pasteurisation plants of the latest design operating in the City, 4 of them being of the High Temperature Short-time Plate Heat Exchanger type and two (of small capacity) operating on the lower Temperature " Holder " system. All these plants have been well maintained during the year and samples of the processed milk have given consistently good results when subjected to the Phosphatase and Methylene Blue Tests. Two firms are licensed to process sterilised milk and in these cases also the prescribed test (Turbidity Test) has been satisfied throughout the year.

The Milk (Special Designation) Regulations, 1949-54 provide for the granting of annual licences to persons or firms authorising them to use a special designation in relation to milk sold at or from premises mentioned in the licence, and in 1955 an Order was made declaring the City to be a "Specified Area" in which only specially designated milk may be sold.

Regular visits were paid by the Inspectors to persons holding licences under the Regulations, and advice given or suggestions made with respect to improvement of their premises. In all cases the persons concerned readily complied with the requirements of the Department.

The following licences, to operate until the 31st December, 1958, were issued :

	<i>No. of persons or firms licensed</i>				<i>No. of premises involved</i>
<i>Dealers' licences—</i>					
" Pasteurised " milk	271	267
" Sterilised " milk	822	851
" Tuberculin Tested " milk	15	20
				<hr/>	<hr/>
Totals	1108	1138
				<hr/>	<hr/>
<i>Processors' licences—</i>					
" Pasteurised " milk	6	6
" Sterilised " milk	2	2
				<hr/>	<hr/>
Totals	8	8
				<hr/>	<hr/>

In addition, 101 licences were issued to persons retailing specially designated milks (mainly " Pasteurised " and " Sterilised ") in the streets of the City. In these cases, the persons concerned collected their supplies of milk daily from the large dairies for immediate delivery to their customers, the " empties " being returned each day.

During the year the undermentioned samples were taken for examination under the Regulations, with the following results.

Type of Milk	No. of Samples taken	No. of Samples which	
		passed the prescribed tests	failed to pass the prescribed tests
" Tuberculin Tested (Pasteurised) "	41	40	1
" Tuberculin Tested "	175	162	13
" Pasteurised "	85	82	3
" Sterilised "	53	53	—
Totals	354	337	17

Particulars of the 17 samples of designated milk which had failed to satisfy the tests were communicated to the appropriate officers of the area in which the milk had been produced so that suitable action could be taken.

Milk and Dairies Regulations, 1949 to 1954. Under the provisions of these Regulations the registration of dairy farmers and of dairy farms is the responsibility of the Ministry of Agriculture, Fisheries and food whilst the registration of milk distributors and other dairy premises is the responsibility of the Local Authority, which is also required to administer those provisions relating to diseases communicable to man.

During the year 600 inspections were made at dairy premises in the City and appropriate action was taken where necessary to maintain compliance with the provisions of the Regulations. Examinations were made of 2637 milk churns and 601 vehicles.

The following contraventions of the Regulations were observed :—

(a) Dairy floors in state of disrepair	3
(b) Depositing crates of milk in the streets	3
(c) Failure to display name and address on vehicle	9
(d) Dirty condition of milk bottles	2
(e) Foreign Bodies in milk bottles	5

All the contraventions were remedied after verbal or written cautions.

Bacteriological Examination of Washed Milk Bottles. Of 22 bottles examined, 6 were found to be unsatisfactory because of a high bacterial count. The dairy companies concerned were notified of these unsatisfactory results, and promptly took the necessary remedial action. Follow-up samples were taken and found to be satisfactory.

Registration of Milk Distributors and Dairy Premises, not being Dairy Farms. 160 applications for registration were received and all were approved.

At the end of the year there were 820 milk traders on the register, the majority being persons carrying on businesses of a general nature and retailing small quantities of milk for the convenience of their customers. The number of dairy premises on the Corporation's Register at the end of 1958 was 29.

Examination of Milk for Tuberculosis. Examinations of milk for Tuberculosis are undertaken by the Public Health Laboratory Service. 251 samples were submitted for examination by the inoculation of guinea pigs. Positive results were obtained from 4 samples, negative reports were received in respect of 241 and in the remaining 6 instances the results were abortive due to the death of the guinea pigs after inoculation. In connection with the positive samples, the Ministry of Agriculture, Fisheries and food Veterinary Service carried out investigations at the premises of 4 cow-keepers. In all cases, diseased animals were either slaughtered or found to have been sent for slaughter.

Brucella Abortus. Examinations of milk for *Brucella Abortus* are undertaken by the Public Health Laboratory Service. During the year, 241 samples of milk were submitted for examination and positive results were returned in respect of 12 samples; the remaining 229 samples were satisfactory. The Medical Officer of Health for the district in which the milk was produced was notified of all the positive results and arrangements were made for the infected milk to be heat-treated prior to its sale or use for human consumption.

"Appeal to Cow" Samples. As the result of adverse reports of the Public Analyst respecting samples of milk found to be adulterated by the addition of extraneous water, visits were paid to 1 farm and 8 "appeal to cow" samples were taken in order to establish the condition and quality of the milk produced by the cows in the dairy herds from which the unsatisfactory samples had originated.

Mastitis in Cows. During the year no notifications of mastitis were received from the Divisional Inspector of the Ministry of Agriculture, Fisheries and Food.

Public Health (Condensed Milk) Regulations, and Public Health (Dried Milk) Regulations, 1923 and 1943. 16 samples of condensed milk were submitted for analysis during the year. All satisfied the requirements of the Regulations. No samples of dried milk were taken.

Registration of Ice-Cream Premises. 33 applications were received for registration of premises under Section 16 of the Food and Drugs Act, 1955, compared with 31 in 1957. All the applications were for the sale of ice-cream. 23 of the applications were granted unconditionally, whilst 7 were approved by the Local Authority subject to the applicants concerned furnishing written undertakings to carry out certain work or to observe certain conditions in order to comply with the requirements of the Act, and 1 application was withdrawn. In 2 instances applications were refused owing to the nature of other business carried on at the shop, e.g., sale of root crops, etc.

Several cases arose where sales of ice-cream were being conducted under conditions which did not satisfy the requirements of the Food and Drugs Act, etc. They were mostly minor offences but in two cases the registrations of the premises were cancelled because the occupiers had failed to bring their premises up to the standard required by the Food Hygiene Regulations.

At the 31st December, 1958 there were 615 premises on the register, 14 for manufacture and/or sale, 4 for storage, and 597 for the sale of ice-cream.

The Methylene Blue Test is still the official test used to determine the cleanliness and bacteriological condition of samples of ice-cream. Grading is determined according to the time taken to decolourise the Methylene Blue added to the samples, which are classified in Provisional Grades, I, II, III and IV in order of merit. 29 samples of ice-cream taken during the year and submitted for examination were placed in the following grades :-

Provisional Grade I	....	....	....	....	22
II	....	....	....	...	7
					—
					29
					—

Standard for Ice-cream. The Food Standards (Ice-cream) Order, 1953, requires that ice-cream shall contain not less than 5 per cent. fat, 10 per cent. of sugar and $7\frac{1}{2}$ per cent. milk solids other than fat. During the year 29 samples of ice-cream were submitted for analysis under the Food and Drugs Act, 1955. All the samples conformed with the standard.

Frozen Lollipops. The regulations respecting ice-cream do not apply to water ices or iced-lollies. 28 samples of iced-lollies were taken for bacteriological examination and 2 samples failed to satisfy the coliform test. In these instances visits were made to the local manufacturers concerned and advice was given by the Inspector so as to secure better results.

Bacteriological Examination of Meat and Milk Products. Of 153 samples examined, 4 were unsatisfactory because of the presence of Salmonella Organisms. Inspectors of the Department visited the local manufacturers and gave advice on improving methods of production.

Food and Drugs Act, 1955—Sampling. The number of samples examined was 2,345, of which 146 or 6.1 per cent., were found to be adulterated, compared with 128 or 6.0 per cent in 1957, when 2,110 samples were taken. Samples of milk taken in the City numbered 1,040 of which 45 or 4.3 per cent were not genuine. The percentage for 1957 was 6.15.

The following table indicates the range of samples taken by the Department's Food and Drugs Inspectors and the subsequent action :-

Nature of Samples	No. of Samples	Genuine	Adulterated or otherwise Unsatisfactory	Letters of caution, etc.	Prosecutions
Beverages	93	81	12	12	—
Cereals	130	129	1	1	—
Confections	264	245	19	19	—
Drugs	163	145	18	18	—
Fats	88	88	—	—	—
Fish, Meats, etc.	264	226	38	38	—
Milk and Milk Products ..	1,081	1,030	51	16	19
Preserves	75	75	—	—	—
Seasonings	76	76	—	—	—
Vegetables	71	67	4	4	—
Miscellaneous	40	37	3	3	—
	2,345	2,199	146	111	19

Eighteen of the prosecutions were in respect of milk containing extraneous water. Only one dairyman was involved and he was fined £18 plus £8 8s. 0d. costs.

The other prosecution was in respect of a sample of hot milk purchased from a local cafe which proved to be reconstituted from skimmed milk powder. A fine of £10 was imposed.

In addition to the foregoing, the City Analyst, Mr. D. J. T. Bagnall, A.C.G.F.C., F.R.I.C., publishes in his Annual Report full details of the laboratory work done by him under the Food and Drugs Act.

Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1940. 1,963 of the samples obtained under the provisions of the Food and Drugs Act, 1955, were also examined in the light of the above-mentioned Regulations and 38 were found to contain permissible preservatives. Six samples of sausages contained undeclared preservatives and cautions were issued to the manufacturers. 156 food substances were found to contain artificial colouring but in no instance was prohibited colouring found to have been used.

Labelling of Margarine. 24 samples of margarine were obtained from shops, but there were no contraventions of the labelling provisions.

Registration of Hawkers of Food and their Premises. Section 61 of the Kingston upon Hull Corporation Act, 1952, gives power for registration by the Local Authority of all Food Hawkers and any premises used by hawkers for the storage of food. During the year 107 food hawkers registered, including 92 vendors of ice-cream and 15 persons who retail other foods.

Food Hygiene. The Food Hygiene Regulations of 1955, marked a considerable step forward in our efforts to secure a higher standard of cleanliness in the handling of food and greater protection against food borne infections. The law is still far from perfect and no doubt other legislation will be necessary in the future, but it is true to say that for several years local authorities will be fully engaged in trying to attain the standards now set before us. Most of the inspectors in the department are concerned with some aspect of food hygiene and it is difficult to assemble the results of all their work in one section of this report without duplicating information given elsewhere under other main headings.

The district inspectors deal with ice-cream vendors and small house/shop property; the factories and shops inspectors supervise food hygiene in most shops and factories and also in hotels, clubs, and cinemas; the food and drugs inspectors are responsible for dairies, ice-cream factories, hospitals, nursing homes and public houses; the offensive trades inspectors look after the fish curing houses, fish and chip shops and vans, tripe boilers, etc.; and the lodging house inspectors deal with catering arrangements in lodging houses and boarding houses. Together they made 2,088 visits to food premises during the year and noted 339 contraventions in connection with food hygiene. 296 written or verbal cautions were given, which were complied with, and resulted in numerous improvements as regards the provision of washing facilities, general

cleanliness of premises, facilities for cleansing equipment, etc. Legal proceedings under the Food Hygiene Regulations were instituted against one person for contraventions of Regulations 6, 15, 16, 17, 18, 19, 20, 23 and 24 and was awaiting court hearing at the end of the year.

Food hygiene work carried out by the Chief Food Inspector and his staff is additional to the above and is dealt with in the next section of this report.

Inspection of Licensed Premises. Public Houses are inspected frequently in the course of sampling under the Food and Drugs Act, enforcement of Shops Acts, supervision of restaurants and refreshment places, etc.

138 Licensed premises were inspected during the year and 34 contraventions of the Food and Drugs Act, Food Hygiene Regulations or Public Health Act were found. These contraventions were readily dealt with by the owners or occupiers after receiving notice from the department.

In addition, 65 improvements were made by the Brewery Companies at the request of the department namely, improved facilities for washing of drinking glasses 17 ; improved ventilation and drainage of cellars 6 ; improved toilet facilities 14 ; structural improvements 10 ; fitting of wash-hand basins and hot water supply 18.

Fertilisers and Feeding Stuffs. Inspections and sampling under the Act are carried out by the Food and Drugs Inspectors, who may, at all reasonable times, enter any premises where such marked articles may be and may take samples either informally or in the prescribed manner. The Inspector can demand the production of the appropriate register and also any statutory statement received by a seller in respect of both First and Second Schedule articles which he has sold but which have not actually been on his premises or in his possession.

65 inspections were made, namely, 18 at retailers' premises, 42 at manufacturers' and 5 at merchants' premises. Several contraventions had taken place and the persons concerned were notified of the offences and cautioned by the Inspectors.

18 samples of feeding stuffs and 3 of fertilisers were obtained and submitted for analysis by the Agricultural Analyst. Of these samples, 8 were taken at the request of other Authorities who had received adverse reports about samples taken in their areas. 15 of the samples of feeding stuffs and 1 of fertiliser were returned as satisfactory. The remaining 3 samples of feeding stuffs and 2 fertilisers were unsatisfactory because the limits of variation laid down in the Regulations were exceeded in one or more of their ingredients. The persons or firms concerned were notified of their failure to comply with the Act and/or Regulations.

Pharmacy and Poisons Act, 1933. Generally speaking, a shopkeeper, although he is not an "Authorised Seller" of poisons, may become a "Listed Seller" of Part II poisons (*i.e.* any substance included in Part II of the Poisons List and not exempted by the Poisons Rules) provided his name and the address of his premises are entered in the list kept by the Local Authority. The usual types of poison set out in Part II of the List are those connected with horticultural sprays, insecticides, seed and bulb dressings, phenols for general household use, rat poisons and hair dyes. Poisons included in Part I of the Poisons List can only be sold by "Authorised Sellers" of poisons (pharmacists, etc.) and the Act requires the keeping of certain registers of stocks and sales for both types of persons.

During the year 12 persons applied in respect of 12 premises to have their names entered in the Corporation's list kept under the Act. 158 persons applied for the retention of their names in the Corporation's list, in respect of 313 premises. All the applications were granted.

258 inspections were made for the purposes of the Act by the Authorised Officers. In 6 cases it was found that persons whose names were not in the Local Authority's List of Persons entitled to sell Poisons included in Part II of the Poisons List were selling phenolic poisons in contravention of the provisions of the Act. After being cautioned verbally by the Inspector in respect of these offences the vendors either discontinued the sale of such poisons or made application for the inclusion of their names in the Local Authority's List. It was also necessary to caution several persons whose names were included in the Local Authority's List for minor contraventions of the Act. All the persons took immediate steps to comply with the legal requirements.

WORK OF THE FOOD DEPARTMENT

The duties of the Chief Food Inspector and his six Assistants include the inspection of the fish markets, the slaughterhouses, retail food shops, and of all meat, fish, fruit and vegetables sold in the City. Other work in connection with food and food premises is carried out by the staff of the Chief Public Health Inspector and has been referred to earlier in this report. The Chief Food Inspector is also responsible on behalf of the Hull & Goole Port Health Authority for the inspections of food imported through the Hull docks.

There is a 100% examination of the carcasses and offals of all animals slaughtered in the city for human consumption. It is also the practice of the Department to insist that all animals brought into the City after slaughter must be inspected before being sold. We are grateful to the Trade for helping us to maintain this complete inspection.

Slaughterhouses. There are seven slaughterhouses in the City and three of these are operated by the Corporation under the supervision of the Medical Officer of Health who is the appointed Slaughterhouse Manager. Of the other four, three are licensed private slaughterhouses and the remaining one is licensed for the slaughter of pigs by cottagers, etc. Although the conditions in all these slaughterhouses are extremely unsatisfactory the staff do their work in a most capable manner.

During the year the Corporation pressed forward with plans for the new abattoir, and most of the ground necessary has now been purchased and cleared. The completion of this abattoir will represent an important step forward in the efficient handling, inspection and distribution of meat in the City.

Table VII below shows the number of animals slaughtered in licensed slaughterhouses during 1958 and in the previous four years. Reference to the Table will show that the total number of animals slaughtered in 1958 showed a slight increase.

Table VIII on page 84 shows the number of carcasses inspected and condemned in the year and Table IX gives details of the number of whole carcasses found to be unsound from causes other than tuberculosis.

Table X gives details of the whole carcasses which were found to be unsound due to infection with tuberculosis.

It will be seen that there has been little alteration in the findings when carcasses were inspected, the number and types of disease remaining much the same. The number of whole carcasses affected with tuberculosis was very slightly greater in 1958, but considerably less than the numbers found in earlier years.

TABLE VII

<i>Year</i>	<i>Cattle (and Calves)</i>	<i>Sheep</i>	<i>Pigs</i>	<i>Totals</i>
1958	13,632	29,681	43,226	86,539
1957	14,604	31,285	38,555	84,444
1956	14,742	37,268	36,656	88,666
1955	11,452	28,826	40,564	80,842
1954	15,512	34,333	36,008	85,853

Slaughter of Animals Act, 1958. There are now 69 persons licensed by this Authority to slaughter animals, including 2 Jews whose licences are subject to their obtaining the necessary licences from the Rabbinical Commission to slaughter by the Jewish method for the food of Jews. The Medical Officer of Health is authorised to issue licences to Mohammedans for the supply of meat to ship's crews, such licences being tenable for 24 hours to cover the period required.

Anthrax. In addition to the ordinary routine inspections, special microscopical examinations were made of the blood and tissue of 28 animals for the anthrax bacillus. The Ministry of Agriculture, Fisheries and Food was informed when the carcass of one sow was found to be positive and they later confirmed the diagnosis. The affected carcass was burned at the Corporation destructor, together with four other pig carcasses which had been contaminated. Three slaughtermen were advised by the Medical Officer of Health to consult their own medical practitioner and all three were later admitted to Castle Hill Hospital for a course of protective injections.

Swine Fever. There were no cases of swine fever in the city during the past year.

Horse Meat. There are now no shops in the city which sell horse meat for human consumption.

Fish Inspection. The Department has one Inspector working full time from the Fish Dock Branch Office on fish inspection on the dock itself and in fish shops in the city. The Chief Food Inspector also devotes some time most mornings to the inspection of fish as it is landed from the trawlers, frequently assisted by his deputy.

During the year 2,259 landings were made by trawlers at St. Andrew's Dock the estimated weight of fish being 220,861 tons, of which 1,396 tons were condemned by the inspectors.

The following is a summary of the quantities of fish landed and the grounds where it was caught.

<i>Fishing Grounds, etc.</i>	<i>No. of Landings</i>	<i>Estimated Tonnage Landed</i>	<i>Weight Unsound Tons</i>
North Sea	173	2,235	10
Iceland	930	93,801	579
Bear Isle	436	46,970	367
White Sea	379	39,105	246
Faroes	52	3,110	1
Norway Coast	206	24,525	81
Greenland	40	5,055	99
Norway Herring	12	2,850	—
Swedish Herring	10	185	—
Miscellaneous	21	1,825	12
British Railways	—	1,200	1
Totals	2,259	220,861	1,396

Many visits were made to the Salters and Curing Houses and in the course of this 17,343 bales and 1,538 cases of wet and dry salt fish were examined before being exported.

CONDEMNED FOOD

Meat : Condemned meat is sold to a local firm and the salvage value of carcase meat is returned to the owners, the Corporation retaining the value of the condemned offals.

Fish : Condemned fish is sold to a fish manure manufacturing company whose premises are near the fish dock. Approximately 5,201 tons of fish were sold during the year for processing into cat and dog food, some of which, under other circumstances, would have been declared unfit for human consumption.

Fruit and Vegetables : If in large quantities these are taken to the tip and covered over.

Tinned Goods : These are destroyed at the Corporation destructor.

The system of voluntary surrender greatly facilitates the work of the Department and during the year 16,270 agreements for the destruction of unsound foodstuffs were entered into by the owners and the Department.

The following is a summary of the unsound food surrendered or seized during the year :—

	<i>Tons</i>
Meat	224
Fish	1396
Fruit and Vegetables	70
Tinned Goods	39
Miscellaneous Foodstuffs	7

Pet Animals Act, 1951. 19 persons were registered, in respect of 20 Pet Shops, under the Pet Animals Act, 1951, during the past year, all premises being visited regularly by the inspectors.

Food Hygiene Regulations, 1955. The various trades and trade associations again assisted the department in the drive towards a better standard of hygiene in the handling, storage and distribution of food, and in general this standard did improve. There were no prosecutions necessary under these regulations during the year.

Food and Drugs Act, 1955. At the end of the year 289 premises were registered under Section 16 of the Food and Drugs Act, 1955, for the preparation of potted meat and other foods, these being as follows :

Manufacture of sausages	117
Manufacture of sausages, potted meat and other meat products	132
Manufacture of salmon paste	1
Cooking of hams, etc.	5
Cooked fish, fish cakes, etc.	9
Meat Pies, etc.	4
Cooked shellfish	15
Pickles	6

There were 2,317 inspections made of registered food premises during the year.

Concern has been felt for the increase in the number of reports of foreign bodies found in articles of food that found their way there largely by accident but very often assisted by the carelessness of the worker. Large firms have modern machinery and methods of packing and their standard of hygiene is very high but careless workers, by their thoughtlessness, may be the cause of complaint against firms of good reputation.

The only two legal proceedings taken by the Food Department were both under this act and both against the same company for similar offences—selling jars of jam containing glass. The first case resulted in a £15 fine and the second, a £20 fine.

TABLE VIII

SUMMARY OF CARCASSES INSPECTED AND CONDEMNED

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	9,068	3,948	617	29,684	43,326
Number inspected	11,888	5,157	617	34,634	48,678
<i>Affected with Diseases other than Tuberculosis—</i>					
Whole carcasses condemned	—	8	22	75	235
Carcasses of which some part or organ was condemned ..	2,490	1,014	20	484	6,684
Percentage of the number inspected affected with disease other than Tuber- culosis and cysticercosis	20.94	19.81	6.80	1.61	14.21
<i>Affected with Tuberculosis only—</i>					
Whole carcasses condemned	13	39	4	—	22
Carcasses of which some part or organ was condemned	672	1,196	2	2	1,543
Percentage of the number inspected affected with Tuberculosis	5.76	24.14	.97	.006	3.21
<i>Cysticercosis—</i>					
Carcasses of which some part or organ was condemned ...	50	8	—	—	—
Carcasses submitted to treat- ment	33	4	—	—	—

TABLE IX

WHOLE CARCASSES FOUND TO BE UNSOUND FROM CAUSES OTHER THAN TUBERCULOSIS

BEEF		MUTTON		VEAL		PORK	
Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.
Emaciation ...	1	Moribund	12	Moribund ...	3	Malignant	
Oedema/		Oedema/		Joint ill	4	Neoplasm ...	1
Emaciation	7	Emaciation	23	Pyæmia	3	Septic Wounds	2
		Emaciation ...	21	Oedema	3	Swine	
		Pyæmia ...	1	Umbilical		Erysipelas ...	36
		Septic		Pyæmia	3	Decomposition....	17
		Pneumonia	1	Pyrexia	2	Moribund ...	49
		Septic Pleurisy	2	Immaturity ...	3	Jaundice	8
		Oedema	9	Pyrexia		Pyrexia	27
		Decomposition	1	Immaturity	1	Traumatism	6
		Pyrexia	3			Pyæmia ...	15
		Bone Taint	1			Leukæmia ...	1
		Gangrene	1			Hydræmia ...	1
						Oedema ...	21
						Gangrene	3
						Pleurisy/	
						Peritonitis	1
						Arthritis/	
						Emaciation	1
						Peritonitis	3
						Oedema/	
						Emaciation .	6
						Septic	
						Pericarditis	1
						Septic	
						Pneumonia	3
						Oedema/Jaundice	2
						Gangrene/	
						Pneumonia	1
						Suspected	
						Swine Fever	3
						Multiple Sores	2
						Septic Peritonitis	2
						Emaciation	8
						Septic Pleurisy	2
						Anthrax....	1
						Anthrax	
						Contamination	4
						Pyæmia/	
						Emaciation	1
						Septicæmia ...	3
						Septic Metritis	1
						Enteritis/	
						Decomposition	1
						Multiple	
						Abscesses	1
						Abnormal	
						Odour	1
Total ...	8	Total ...	75	Total ...	22	Total ...	235

TABLE X

WHOLE CARCASSES AFFECTED WITH TUBERCULOSIS

				<i>1954</i>	<i>1955</i>	<i>1956</i>	<i>1957</i>	<i>1958</i>
Cows	.....	.....	.....	80	52	26	45	49
Heifers	.....	.....	.....	14	10	6	3	4
Bulls	.....	.....	.....	6	1	1	—	1
Oxen	.....	.....	.....	18	10	10	13	8
Pigs	.....	.....	.....	31	33	25	20	22
Calves	.....	.....	.....	1	1	4	5	4
				—	—	—	—	—
				150	107	72	86	88
				—	—	—	—	—

PART III

NATIONAL HEALTH SERVICE ACT, 1946

NATIONAL HEALTH SERVICE ACT, 1946

“ THE FIRST TEN YEARS ”

In his instructions regarding the preparation of annual reports for the year 1958, the Minister asked that Medical Officers of Health should include a brief review of the manner in which the local Health Services have functioned in the wider setting of the National Health Service generally since its introduction in 1948.

Broadly speaking, the National Health Service is divided into three main sections. The Hospital and Specialist Services are provided through Hospital Boards working on a regional basis, the general medical and dental practitioner services, together with the pharmaceutical and supplementary ophthalmic services are provided through Executive Councils, whilst County Councils and County Borough Councils, as Local Health Authorities, provide various types of services basically aimed at the prevention of illness and the care and after-care of patients in their own homes. The areas of Executive Councils conform to those of the Local Health Authorities.

The National Health Service is a large and complex scheme, and, in order to function efficiently, it is important that there should be the closest possible co-operation between the three bodies charged with the responsibility of running the service. Whilst each body has its own particular task, much of its work affects, or is affected by, the activities of the other two bodies. Co-ordination of effort is essential, therefore, if the ideals of the service are to be attained and maintained.

The following notes endeavour to show how far the Local Health Services in Kingston upon Hull have been developed, with particular reference to their relationship with the services provided by the Regional Hospital Board and the Executive Council.

Administration. Representatives of the Local Health Authority have served on the various Liaison Committees set up to co-ordinate the administration of the National Health Service. In addition, members of the City Council have been appointed to serve on both local Hospital Management Committees and the Kingston upon Hull Executive Council, although, of course, not necessarily as nominees of the City Council. The Medical Officer of Health is a member of one Hospital Management Committee, of the Executive Council, and of the Local Medical Committee, as well as taking an active part in many other Committees concerned.

Maternity Services. One of the results of the introduction of the National Health Service has been the increased provision of maternity medical services by approved general practitioners. The number of expectant mothers who now book a doctor for their confinement has risen considerably over the past few years. The midwives provided by the Health Department have welcomed this closer relationship with the family doctor and expectant mothers seeking the services of a midwife are encouraged to book a doctor for their confinement. The general medical practitioner concerned is informed of the results of blood tests, etc., carried out on each expectant mother examined at the Department's ante-natal clinics.

Two particular services have been developed by the Local Health Authority for the care of premature babies. Two nurses with special training in the care of premature babies have been appointed and are available at any hour to take over from the normal midwifery staff. In addition, two incubator cots have been provided for the conveyance of premature babies to or from the hospitals. These cots were made by the City Engineer's Department in accordance with a specification drawn up by the Medical Officer of Health. One cot is always maintained at the correct heat so that it can be placed in an ambulance at a moments notice. Inside the ambulance the cot is capable of being controlled for humidity and for the supply of oxygen at the correct temperature.

The Health Department has continued to book confinements for admission to the Maternity Hospital on social grounds, the necessary investigations being carried out by the Department's staff. In addition, liaison is continued by the attendance of a Health Visitor at the Hospital's ante-natal clinic and at the Hospital itself in order to deal with the social problems of the patients. Due to the very heavy demands for admission to the Maternity Hospital as compared with the number of beds available, a substantial number of mothers are discharged before the tenth day. The Health Department's midwifery and home help staff have undertaken the care of these early discharges.

For those expectant mothers being confined at home the Department has nursing requisites available for loan free of charge, including, if necessary, single bedsteads and bedding. All expectant mothers are given the opportunity of having a chest X-ray examination through the Regional Hospital Board's Mass X-ray Unit.

Sick Children. At the beginning of 1957, a special sick children's service was set up within the Department's District Nursing Service. This service is intended to assist general medical practitioners who might, without the availability of such a service, consider it necessary to admit a child to hospital. It is also of assistance to the Hospital service in that it enables children to be dis-

charged earlier than would otherwise be possible. This idea of nursing children at home as much as possible in preference to taking the children away from their familiar surroundings and breaking the close parental relationship has been supported in the report issued early in 1959 by a Committee of the Central Health Services Council who reviewed the welfare of children in hospital.

General Illness, Care of the Aged, &c. By the operation of the National Health Service Act, Local Authorities relinquished their direct responsibility for the treatment of patients in hospital. The Act gave them, however, a closer interest in the patient being nursed at home and the Local Health Authority has become responsible for supplying many of the domiciliary services which can be called upon by the general medical practitioner.

In Kingston upon Hull the District Nursing Service has been expanded to meet increased demands from the general practitioners. A limited number of nurses remain on duty until late at night in order to answer any emergency call and also to undertake the giving of late evening injections on behalf of the patient's doctor. The administration of injections by the District Nurses is perhaps the one aspect of the Service which has shown the greatest increase. The regular bathing of patients has been undertaken by nursing orderlies working under the supervision of the District Nurses.

The Sitters-up Service inaugurated in Kingston upon Hull in 1948 was one of the first of its kind in the country. Under this scheme persons with some training or nursing experience are employed to sit-up with aged or chronic ill patients who have no-one to look after them at home, or whose relatives require some relief from the continuous task of caring for a sick or aged person. The Sitters-up Service is run in conjunction with the District Nursing Service.

The Home Help Service, which, in Kingston upon Hull, was restricted to maternity cases prior to 1948, has been expanded to provide assistance for the chronic sick and the aged.

The District Nursing, Sitters-up and Home Help Services form a combined team which has done much to ease the pressure of hospital beds and at the same time relieve general medical practitioners of anxiety in respect of patients being treated at home.

The Local Health Authority has also provided auxiliary services, such as the loan of nursing requisites free of charge, a domiciliary occupational therapy service for long-term patients confined to their homes and recuperative holidays for patients recovering from illness or in need of a rest to avoid a breakdown in health.

Tuberculosis. In common with most other local health authorities, Kingston upon Hull appointed the Regional Hospital Board's Consultant Chest Physician as a part-time Officer responsible through the Medical Officer of Health for the after-care work in relation to tuberculous patients. Special tuberculosis visitors appointed by the Local Health Authority work with the Chest Physician attending clinics and visiting patients in their own homes.

The work of the District Nurses in the giving of injections of antibiotic drugs has permitted the Chest Physicians to carry out the domiciliary treatment of many tuberculous patients. Whilst domiciliary treatment of tuberculous patients is not quite so important today it was a vital necessity a few years ago when the number of sanatorium beds available in this area fell far below the demand.

The Health Department has co-operated very closely with the Chest Physician in the detection of tuberculosis. In addition to undertaking routine propaganda work in relation to the mass radiography unit, it has paid particular attention to family contacts of tuberculin positive 13 year old school children brought to light under the B.C.G. vaccination scheme, and contacts of toddlers who were found to be positive to the tuberculin skin test when answering the invitation issued to parents to attend a child welfare clinic when their children reach the second, third and fourth birthday.

The Consultant Chest Physician undertakes the B.C.G. vaccination of contacts of notified cases of tuberculosis, whilst the Health Department arranges and carries out the vaccination scheme for 13 year old school children. In Kingston upon Hull, as will be seen from the section of this report dealing with tuberculosis, there has been a ready response by parents to this scheme for vaccination against tuberculosis. It is too early as yet to judge how far this scheme is responsible for the rapid fall in the number of cases of tuberculosis being found in the 15-25 year age group, but there can be no doubt that the scheme is contributing substantially to the conquest of this disease.

Ambulance Service. The Ambulance Service provided by the Local Health Authority has been called upon each year to transport more and more patients over more and more miles. The expansion of the service has been effected not only by an increase in the number of vehicles, but also by the greater usage of each vehicle made possible by the adoption of a radio control system. The increase in the number and capacity of sitting case vehicles is undoubtedly one of the important developments in this service over the past few years and has been brought about by the greatly increased out-patient facilities now being provided by the Hospital Service.

Vaccination & Immunisation. Prior to 1948 the vaccination and immunisation service provided by the Health Department was more or less limited to vaccination against smallpox and immunisation against diphtheria. To these have been added immunisation against whooping cough and vaccination against poliomyelitis and tuberculosis. Except for vaccination against tuberculosis, the Local Health Authority's arrangements for vaccination and immunisation provide for the participation of general medical practitioners, the majority of whom have agreed to protect those of their patients who are eligible under the various schemes.

Mental Health Services. Considerable expansion has taken place in the mental health services which were combined under the Local Health Authority in 1948. The staff of mental health workers specially appointed to care for the mentally ill and mental defectives living within the community has been increased and general medical practitioners are given details monthly of staff available at night and weekends outside of normal office hours.

In Kingston upon Hull particular attention has been given to the care of mental defectives. A new Occupation Centre (the Holden Centre) was opened in September, 1957. It provides accommodation for 135 children and is situated in an open area on the outskirts of the City. It occupies approximately half of a site which was made available to the Health Department and plans are now being finalised for the erection of an Adult Occupation Centre on the remaining land to accommodate 120 males and 80 females. Meanwhile, however, temporary centres have been established for both adult males and adult females, whilst the experiment of providing a Day Centre for Low-grade Mental Defectives has been most successful.

These activities whilst of direct benefit to the mental defectives under the care or supervision of the Local Authority are also a great boon to parents who are relieved for some part of the day of the constant need to maintain their watch upon the defective.

Considerable assistance has been received from the Consultant in mental deficiency appointed by the Regional Hospital Board. In addition to taking effective action to provide places for those defectives whom it was considered necessary to admit to hospitals and institutions the Consultant has introduced a scheme for short term care which has proved both popular and beneficial.

In the field of mental ill-health close liaison has been maintained with the Hospital Service. Two mental health workers have attended regularly at the neurosis clinic held at the Kingston General Hospital undertaking any necessary

interviewing and home visiting of patients. Mental health workers have also maintained close contact with the Consultant at the De la Pole Hospital and have undertaken the after-care of patients referred to them on discharge.

During 1957 the Local Health Authority joined with the Regional Hospital Board in the opening of a Psychiatric Centre. At this centre—known as Pashby House—the Consultant and nursing staff are supplied by the Hull "B" Group Hospital Management Committee, whilst the premises and domestic staff are supplied by the Local Health Authority. The aim of the Centre is to provide occupational therapy and individual or group psycho-therapy in order to prevent the necessity of a patient being admitted to a mental hospital.

CONCLUSION. Naturally, development over the first few years of the National Health Service was slow, whilst each branch of the service surveyed its own field of work. The lack of money for development also had its effect. During the last 3 or 4 years, however, there has been a steady expansion and improvement of the service and the Local Health Authority has taken a full share in the instigation and the putting into effect of new ideas. There is little doubt that many of the initial difficulties have been overcome and the pattern of the service has now been generally accepted.

In Kingston upon Hull the first 10 years of the National Health Service reflects very satisfactory progress in the provision of a comprehensive service for the citizens. Whilst a large part of the Service's efforts and funds have been devoted to the treatment of ill-health, the preventive work of the Local Health Authority has been continued with vigour and over the next decade is likely to assume greater importance and have a greater effect than over the first 10 years.

SECTION 21—HEALTH CENTRES

Early in the year, it became apparent that the negotiations which had been proceeding between the Local Health Authority, the Kingston upon Hull Executive Council and the Local Medical Committee regarding the erection of a Health Centre on the Bilton Grange Estate, were unlikely to reach a satisfactory conclusion. In May, therefore, the Health Committee decided to abandon this scheme and to proceed only with the erection of a combined Maternity and Child Welfare and School Health Service Clinic.

It was in October, 1952, that instructions were first given for the appropriate officials to confer with a view to the submission of a scheme for the erection of a Health Centre on the Bilton Grange Estate. Many difficulties were overcome and following agreement in principle by all concerned, plans were submitted to

the Ministry of Health in July, 1954. Tenders for the actual building work were considered in April, 1956, but, as the Minister was unable to recommend the issue of loan sanction, further progress was not possible. With this additional delay, further difficulties arose, culminating in the general medical practitioners concerned indicating that they felt that no useful purpose would be served by the erection of a Health Centre.

Further consideration was given during the year to the proposed provision of a Health Centre to serve the Greatfield Estate.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Clinics. The ante-natal clinics have continued to be fairly busy throughout the year. Due to rehousing of some of the young mothers from the central area of the City to the new estates on the outskirts, it was necessary to discontinue three sessions, whilst one new clinic was opened. Attendances at West Hull and East Hull Clinics have dropped, so that two ante-natal sessions per week are now sufficient at both of these centres instead of the three which were held formerly. Numbers were so small at the Priory Road ante-natal clinic that it was discontinued. A new clinic has been started in the Methodist Church Hall at Nestor Grove, Bilton Grange Estate, until such time as the Department's own clinic premises are available.

It has now become the practice for the domiciliary midwives to examine the routine cases themselves in the clinics, leaving the doctor to see first visits, cases which have reached the thirty-sixth week of pregnancy and special cases. The midwives have appreciated this opportunity to do clinical work, and where it is possible to provide two examination couches the patients have only a short wait before they are seen.

It is very desirable that all women attending the ante-natal clinic should have a haemoglobin test for anaemia as well as the other routine blood examinations. This additional test cannot be undertaken by the hospital pathological department owing to shortage of staff, and so rough tests have been tried in the clinics. As no method had proved satisfactory, an M.R.C. grey wedge photometer was purchased during 1958 and two part-time nurses were trained to use the apparatus. These nurses will attend all the ante-natal clinics starting January 1st, 1959, when it is hoped that all the mothers will be tested for anaemia both at their first visit and at the thirty-fourth week, any abnormal cases being referred to the pathological department for further investigation.

Mothercraft and Relaxation Classes. These classes are held in conjunction with all the ante-natal clinics but mothers who are not attending for medical care

are welcomed. Each class is held by a midwife and a health visitor, and visual aids including suitable films and filmstrips are available to help in their teaching. Six sessions are held weekly, including two evening sessions, and a further class has been started at the hostel for unmarried mothers. More of the midwives are being trained to undertake this type of teaching, and as their interest grows, so the number of their patients who come to the classes is likely to increase.

Premature Baby Service. Two specially trained midwives have continued to run this service, being responsible for the care of premature babies born and nursed in their own homes and for premature babies discharged from hospital but needing further supervision. They attended 164 babies during the year.

Birth Control Clinic. The birth control clinic continued to run smoothly. There were 156 new cases and 913 attendances were made during the year.

Care of Unmarried Mothers.

	<i>Cases Referred</i>	<i>Grant made by Corporation</i>
Hull Moral Welfare Association	120	£150
Sutton House	26	£1,300

Child Welfare Clinics. Two further clinics have been opened on the new housing estates, one in Nestor Grove Methodist Church Hall and one on Saturday mornings in Ashwell Avenue Infants' School. These premises are very useful as a temporary measure, but neither is entirely satisfactory for clinic purposes and it will be possible to give a far better service when new clinics are built.

The clinic which had been held at King's Hall for very many years was transferred to Trafalgar Street Church Hall during the year, as the site and premises appeared to be more suitable. The rise in the clinic attendance has proved that the move was justified.

The clinic in St. Michael's Church Hall was to be transferred to the hall of Kingston Wesley Church on January 1st, 1959, as again the premises were better for clinic purposes.

Much has been done recently to brighten the clinics held in Church halls. Colourful screen covers are now in use, posters are displayed and each clinic has a supply of small toys. Where a clinic cannot be made to appear attractive, a search has been made for alternative accommodation, but this is not always available in the right area. Even so, the general standard throughout the clinics is now quite good.

Artificial sunlight clinics, once of great therapeutic value in the treatment of rickets, are becoming unnecessary, as the disease now only occurs rarely. Two of the clinics had so few children attending that they were discontinued, leaving the East and North Hull Clinics to deal with all the cases referred.

With the decline of rickets and other bone diseases, there are many fewer orthopaedic deformities amongst modern children. Work at the orthopaedic and the physiotherapy clinics at East Hull has steadily decreased until none was left. The sessions were discontinued therefore, and the physiotherapist transferred to the School Health Service.

The system of sending birthday cards to all pre-school children inviting the parents to bring them to the clinic was suspended for a short time owing to the demands of the poliomyelitis vaccination scheme on clerical assistance. However, the scheme of tuberculin testing at each birthday examination continued, 295 tests being carried out during the year with no positive reactions.

Day Nursery. Until the last month of the year the day nursery had remained remarkably free from infection and the average attendance was high—16 children below 2 years of age and 24 in the 2—3 year old group. Unfortunately an outbreak of Sonne dysentery occurred in December which considerably reduced the number of children attending.

The day nursery, in conjunction with the Education Department, trains 12 nursery students each year. An outbreak of an infection such as Sonne dysentery which can be so easily diagnosed, whilst it is always to be regretted, serves as a very salutary lesson to young students who might otherwise regard the prevention of cross infection as a somewhat academic subject with no practical application.

Throughout the year the waiting list was very short and there was no delay in admitting priority cases. The reasons for admission were as follows:-

Illegitimate children	....	....	....	28
Separated or divorced parents	....	....	....	20
Widows' or widowers' children	....	....	....	5
Sick parents	....	....	....	12
Mothers' confinement	....	....	....	8
University students' children	....	....	....	4
Non-priority cases	....	....	....	60

Of the 11 nursery students who took the examination during the year, all passed and are now working as follows :-

Nursery school	....	....	....	6
Residential nursery	....	....	....	3
Residential blind school	....	....	....	1
Maternity home	....	....	....	1

Statistics.

Ante-Natal Clinics	No. of Sessions	Attendances		
		First	Re-attendances	Total
<i>Sykes Street Clinic—</i>				
Monday and Thursday afternoons	99	1,047	3,749	4,796
Wednesday morning	53	378	629	1,007
<i>East Hull Clinic—</i>				
Monday*, Wednesday and Friday mornings	109	636	1,966	2,602
<i>North Hull Clinic—</i>				
Tuesday morning	52	140	458	598
<i>West Hull Clinic—</i>				
Monday morning*, Tuesday and Wednesday afternoons	109	814	2,518	3,332
<i>Priory Road Clinic—</i>				
Tuesday afternoon*	43	65	224	289
<i>Marfleet Lane Clinic—</i>				
Thursday morning	51	252	810	1,062
<i>Nestor Grove—</i>				
Monday morning	48	76	259	335

Total new patients attending during the year 3,408

* Now discontinued.

Mass Radiography

No. of ante-natal patients attended	—	479
No. of patients with tuberculosis	—	3

Child Welfare Clinics

	1956	1957	1958
No. of Centres provided	18	17	19
No. of Sessions during the year	1,374	1,349	1,323
No. of children first attended under 1 year of age	3,255	3,013	3,326
Total number of children attending	7,515	7,731	6,669
Total attendances	43,242	43,908	43,865
Cases seen by Medical Officers	15,252	15,676	15,842
Cases referred to Hospital for treatment	248	277	188
No. of tuberculin jelly tests carried out	829	1,117	295
No. found to be tuberculin positive after checking with Heaf Test	7	4	—

Welfare Foods and Nutritives. Sales from the central depot at Witham and from Maternity and Child Welfare Centres :-

	1956	1957	1958
<i>Welfare Foods—</i>			
" National " Dried Milk (tins)	220,343	160,338	115,838
Cod Liver Oil (6 oz. bottles)	33,350	28,389	17,474
Orange Juice (6 oz. bottles)	235,930	239,226	143,732
A and D Capsules (packets of 45)	16,506	15,103	14,884

Nutritives—

Adexolin	1,776	4,011	5,876
Abidec	173	365	305
Cod Liver Oil Emulsion (8 oz. bottles)	775	534	438
Virol (8 oz. bottles)	3,087	2,746	2,148
Virolax	41	73	58
Rose Hip Syrup	1,188	3,066	4,584
Lactogol	747	1,775	1,628

Fireguards—

No. of fireguards sold	609	493	604
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Infectious Diseases—

	<i>At Home</i>	<i>In Hospital</i>
Cases of Puerperal Pyrexia notified	44	125
Cases of Ophthalmia notified	—	51

Maternal Mortality

Rate per 1,000 live and stillbirths	1.01
No. of maternal deaths due to pregnancy	6

Causes of death—

- (1) Postpartum haemorrhage ; rupture of uterus during labour
- (2) Eclampsia ; toxæmia of pregnancy
- (3) Pulmonary embolism ; pelvic thrombosis ; childbirth
- (4) Cardiac failure due to shock and uterine haemorrhage whilst undergoing a lower segment caesarian section operation under cyclo-propane gas and oxygen anaesthesia for obstructed labour caused by a persistent occipito-posterior lie of foetus
- (5) Postpartum shock and haemorrhage ; rupture of the uterus during labour
- (6) Pulmonary amniotic fluid embolism ; parturition

No. of maternal deaths associated with pregnancy	2
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Causes of death—

- (1) Gliosarcoma of the brain
- (2) Primary cardiac failure due to operation for relief of mitral stenosis, with pregnancy as a contributory factor

The Maternity and Child Welfare and School Clinics, provided by the Corporation, are interavailable to patients as required. Details of the clinics etc., provided under Section 22 of the National Health Service Act, 1946, are as follows :—

(a) Maternity and Child Welfare.

Infant Welfare Sessions—

West Hull Clinic, Coltman Street	Monday Thursday	} 2 p.m.
Trafalgar Street Church Hall	Monday Wednesday	} 2 p.m.
East Hull Clinic, Morrill Street	Wednesday Thursday Friday	} 2 p.m.
Methodist Mission Rooms, Carlton Street	Tuesday	2 p.m.
Parish Hall, Church of Transfiguration, Albert Ave	Friday	2 p.m.
Methodist Church Rooms, Cottingham Road	Wednesday Friday	} 2 p.m.
Ashwell Avenue Infants' School	Saturday	9-30 a.m.
Methodist Church Hall, Nestor Grove	Monday	2 p.m.
Methodist Rooms, Sutton	Tuesday	2 p.m.
North Hull Clinic, Ellerburn Avenue	Thursday	2 p.m.
Methodist Mission Hall, Preston Road	Tuesday	2 p.m.
Church of the Ascension, Priory Road	Monday Friday	} 2 p.m.
St. Nicholas Church Hall, Pickering Road	Wednesday	2 p.m.
St. Martin's Church Hall, North Road	Monday	2 p.m.
Sykes Street Clinic	Thursday Friday	9-30 a.m. 2 p.m.
St. Ninian's Church Hall, Chanterlands Avenue	Friday	2 p.m.
Kingston Wesley Church Hall, Holderness Road	Thursday	2 p.m.
St. Philip's Church, Amethyst Road	Wednesday	2 p.m.
Longhill Infants' School	Saturday	9-30 a.m.

Ante-Natal Sessions—

Sykes Street Clinic	Wednesday	9-30 a.m.
For Midwifery Centre cases	Monday Thursday	} 2 p.m.
East Hull Clinic, Morrill Street	Wednesday Friday	} 9-30 a.m.
North Hull Clinic, Ellerburn Avenue	Tuesday	9-30 a.m.
West Hull Clinic, 69 Coltman Street	Tuesday Wednesday	} 2 p.m.
St. George's Church, Marfleet Lane	Thursday	9-30 a.m.
Methodist Church Hall, Nestor Grove	Monday	9-30 a.m.

Birth Control Session—

Sykes Street Clinic	Tuesday	9 a.m.
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Artificial Sunlight Sessions—

East Hull Clinic, Morrill Street

Tuesday	}	9-30 a.m.
Friday		

North Hull Clinic, Ellerburn Avenue

Monday	}	9-30 a.m. 2 p.m.
Thursday		

Mothercraft and Relaxation Classes—

East Hull Clinic, Morrill Street

Friday	Morning
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West Hull Clinic, Coltman Street

Wednesday	Afternoon
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North Hull Clinic, Ellerburn Avenue

Tuesday	Morning
---------	---------

Sykes Street Clinic

Wednesday	}	Evening
Thursday		

Nestor Grove Clinic

Monday	Morning
--------	---------

Sutton House

Thursday	Afternoon
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X-Ray Sessions—

East Hull Clinic, Morrill Street

Monday to Friday,
9 a.m. to 12 noon
2 p.m. to 5 p.m.

(b) Day Nursery

Pearson Park

Monday to Friday,
7 a.m. to 6 p.m.
Saturday, 7 a.m. to
2 p.m.

PROVISION OF DENTAL TREATMENT

As will be seen from Table XI the amount and type of work carried out by the Authority's dental officers during the past year have been approximately the same as in the previous year.

The evening dental sessions have been persevered with and by means of these and a proportion of the daytime sessions, all demands have been satisfied.

There has been a slight improvement in that a little more conservative work has been accomplished and fewer extractions have been performed resulting in the provision of fewer dentures.

The true aim of the service, of course, can hardly be said to have been attempted on the scale which is necessary. That is the fostering of a desire on the part of the patients to take a real interest in dental health and hygiene and a genuine attempt to preserve the natural dentition. Under the very limited staffing conditions this is hardly possible but mention must be made of the very valuable work which is being done in this field by the dental hygienist.

TABLE XI

(A) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	374	374	465*	242
Children under five	241	225	228*	197

* Includes cases under treatment and carried forward from 1957.

(B) FORMS OF DENTAL TREATMENT PROVIDED

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures Provided		Radio-graphs	Polishing and Oral Hygiene
							Full Upper or Lower	Partial Upper or Lower		
Expectant and Nursing Mothers	205	244	—	—	1,970	125	215	44	15	245
Children under five	2	5	2	—	642	136	—	—	2	2

SECTION 23—MIDWIFERY

During the year 81 midwives notified their intention to practice as midwives and 13 as maternity nurses. 52 of these were midwives employed by the Local Health Authority, 28 were employed in hospitals and maternity homes and one practised as an independent domiciliary midwife.

The midwives employed by the Local Authority attended 2,614 cases during the year as follows :-

(a) (i) When a doctor was not booked but was present at the time of delivery	19
(ii) When a doctor was not booked and was not present at the time of delivery	294
(b) (i) When a doctor was booked and was present at the time of delivery	1,234
(ii) When a doctor was booked and was not present at the time of delivery	1,067
Total	2,614

Medical aid was called in 753 cases.

Analgesia. 24 approved machines are now in use for administration of trilene by the domiciliary midwives. Analgesics were given by the domiciliary midwives as follows :-

		1956	1957	1958
Gas and Air	....	807	291	86
Trilene	....	1,343	1,723	1,985
Pethidine	....	1,419	1,472	1,374

Emergency Obstetrical Unit. The flying squad received 53 calls during the year and in the course of treatment 72 pints of blood and 26 pints of intradex were given intravenously. 5 cases were transferred to hospital after resuscitation at home.

Midwifery Training School. 18 pupils commenced a six months' period of training at the school and 2 others came for a period of 3 months, having already done 3 months' Part II training at Fulford Maternity Hospital. All 20 pupils entered for the State examination and were successful.

Refresher Courses. Under the new rules of the Central Midwives Board all midwives must attend a refresher course every 5 years. In accordance with the requirements, 11 Corporation Midwives attended refresher courses during the year. In addition, 4 midwives attended courses in relaxation and mothercraft and have since been able to teach in the special classes which are held for expectant mothers.

Refresher Courses in Hull. The Department organised three further courses at Ferens Hall, Cottingham, and these were attended by 292 midwives from all parts of the country. This brings the total of midwives who have visited Hull for our Refresher Courses during the past 3 years to 817.

Each course lasts a week, and although this is a very short time in which to cover the field of midwifery and allied subjects, it must be borne in mind that many midwives are very tired when they arrive and, in any case, are more accustomed to an active life than sitting in a classroom.

It is essential, therefore, that the week's programme be designed to give as much variety as possible and to reduce formal lectures to a minimum. Two complete afternoons are given up, therefore, to visiting places of interest. Parties of midwives have been to most of the local hospitals and the medical and nursing staffs have gone to a good deal of trouble to make these afternoons interesting and instructive. Visits have also been arranged to such places as a Port Medical Centre, to the Child Guidance Clinic and to local factories, and here, too, they have been made most welcome and have gained a good deal of information.

Members of the Health Department, too, have contributed greatly towards the success of these courses. Displays have been produced, midwifery apparatus explained, relaxation classes demonstrated and film programmes drawn up. The midwives have been most appreciative of the arrangements made for them and these courses are proving of great educational value both to the visitors and to our own staff.

Staff Changes. 5 midwives ceased employment with this Authority during the year, whilst 2 full-time midwives and 2 part-time maternity nurses were appointed.

There is a shortage of midwives throughout the country, both in the hospital and domiciliary services. Hull has been more fortunate than many areas, and although the domiciliary midwifery service has been strained from time to time, this has been due to the staff sickness occurring at the same time as one or two posts were vacant. Part-time maternity nurses have been employed to take over the nursing of patients being discharged early from hospital. Nevertheless, it is most desirable that the vacancies on the staff should be filled if the domiciliary midwifery service is to fulfil all its obligations at peak periods.

Repeated advertisements of the posts have brought no response, so the Health Committee has decided to convert the premises at 339-341, Anlaby Road, into flats and maisonettes which will be made available for midwives to rent. It is hoped that this measure may attract applicants for the vacant posts.

SECTION 24—HEALTH VISITING

By the end of the year the number of staff employed on health visiting duties was down slightly on the previous year. Of the 34 so employed, 29 hold the Health Visitor's Certificate and two will be taking the examination early in January. The number carrying out full time duty in the tuberculosis service remains the same, i.e. 5, of whom three do not hold the Health Visitor's Certificate. Four part-time State Registered Nurses also carried out duties in ante-natal, sunlight, immunising and poliomyelitis vaccination clinics. Of the Health Visitors who left the department during the year, four did so for domestic reasons, one went to Southern Rhodesia and one to the East Riding County Council. Another died as the result of an accident while on duty, and two were retired as being permanently unfit.

The number of domiciliary visits paid by the Health Visitors increased but the number of clinic sessions attended showed a slight decrease. The health education material produced by the four Health Visitors who devote one session a week to it, was increased, and the displays were of great value in the clinics. A special effort was made for 'Accidents in the Home' week during November.

One Health Visitor continued to pay a weekly visit to the Maternity Hospital, and another attended at two of the hospital ante-natal clinics each week to help with social problems, which were mainly concerned with the welfare of children whilst mother was in hospital.

Close co-operation with the Welfare Services Department was maintained in the work with the aged. The number of visits shows a slight decrease on last year, but a good deal of time and patience is required to persuade many of these aged people to co-operate for their own welfare.

Two courses of instruction in Home Nursing were given to members of the Civil Defence unit, and talks to various church organisations on different aspects of the work of the department were given by members of the staff.

Student nurses from the Hull Royal Infirmary and Western General Hospital spent a day on the district with a Health Visitor and a half day with a District Nurse following their lectures on social medicine.

Four Health Visitors attended post-graduate courses held at Oxford and Nottingham.

Training of Health Visitors. Six students completed their course of training. Four were successful in the examination and the other two have remained in the department and will re-sit the examination early in 1959. Ten students commenced the new course of training in September, one of these being an independent student from another Authority.

The number of clinic sessions attended by Health Visitors was 3,146, talks being given at Infant Welfare sessions and to expectant mothers.

VISITS PAID BY HEALTH VISITORS

To Expectant Mothers—						
First Visits	....	....	....	....	....	1,188
Re-visits			....	....	....	1,127
To Children under 1 year—						
First Visits	..	....	....	....	....	5,656
Re-visits		....	....	....	....	39,090
To Children 1-5 years—						
First Visits	....	....	....	....	....	299
Re-visits			....	....	....	65,277
To the Aged and Chronic Sick	....	....	....	....	....	1,360
Miscellaneous, infection, after-care, hospital						5,985
Total Ineffective Visits	....	....	....	....	....	25,241

SECTION 25—HOME NURSING

During the year eight nurses left this service and at the end of the year the number of staff employed was slightly below last year's number. Of the nurses who left, one did so to take Health Visitor training, two for Midwifery training, one to join the School Health Service, three for domestic reasons and one returned to hospital service.

Once more there were long periods of sickness amongst some members of the staff, but again we were able to avoid dilution of the service which would have occurred if it had been necessary to employ untrained people.

The total number of cases nursed was 6,219 of whom 1,250 were brought forward from the previous year whilst the number remaining on the books at the end of the year was 1,132. A total of 191,617 visits were paid to these patients.

Classification of cases :

	<i>Cases</i>	<i>Visits</i>
Surgical	2,064	40,916
Medical	3,688	140,356
T.B.	174	6,756
Maternity complications	275	3,328
Infectious diseases	18	261
	<hr/> 6,219	<hr/> 191,617

Four nurses attended post-graduate courses, two going to Exeter in April and two to London in September. The lectures and practical instruction they received were of great value and the latest modern techniques were passed on to the other nurses.

A total of 352 children were nursed by the Paediatric Nurses. One nurse only is carrying out this work at present, and to facilitate her travelling across the City she has the use of a Douglas Vespa Motor Scooter. Late morphia injections and emergency visits accounted for 1,435 of the visits paid. The four Nursing Orderlies carried out all weekly bathings and assisted the nurses with some of the very heavy helpless cases where there was no-one else available to assist.

The nursing requisites loaned to patients in their own homes greatly facilitate the work of the nurses.

14 Douglas Vespa Machines were available to the nurses and the remainder use either cycles or mechanised cycles.

Staff at the end of the year :

Full-time :

- 1 Acting Superintendent
- 33 State Registered Nurses (female) (14 District Trained)
- 4 State Registered Nurses (male)
- 1 State Enrolled Assistant Nurse (male)
- 3 State Enrolled Assistant Nurses (female)
- 4 Nursing Orderlies

Part-time

- 5 State Registered Nurses (female)
- 1 State Enrolled Assistant Nurse (male)

Sitters-up Service. The demand on this service remained heavy throughout the year. Although the number of cases attended (510) showed a slight decrease, the number of visits (16,698) was up by 4,000 on last year's figures. This was partly due to extra service being required when there was delay in getting patients into hospital, and in some cases where there were no relatives to take over following discharge from hospital. Help was also given to enable mothers to keep clinic and hospital appointments where there was no-one to care for several children under school age.

At the end of the year, 80 sitters-up were employed on a casual basis, 44 of whom worked full-time, the remainder undertaking to work for a mutually agreed number of hours weekly. Although these figures show a substantial increase over 1957, the benefit to the service was minimised due to sickness occurring among the staff.

SECTION 26—VACCINATION AND IMMUNISATION

Vaccination against smallpox and poliomyelitis and immunisation against diphtheria and whooping cough are available through the various clinics of the Health Department, as well as those general practitioners who have agreed to provide such a service.

At the end of the year 137 general practitioners had expressed their willingness to participate in immunisation schemes for diphtheria, whooping cough and vaccination against smallpox. So far as poliomyelitis immunisation is concerned, only 77 doctors have agreed to undertake this form of immunisation. The reluctance of general practitioners to take part in the scheme for poliomyelitis immunisation is probably due in part to the uneven and restricted supplies of vaccine available for use earlier in the programme. Now that supplies of vaccine are becoming more plentiful and the scheme has been extended to include persons up to the age of 26, more practitioners may desire to participate in the scheme.

Vaccination and immunisation in early infancy are recommended by each Health Visitor when she makes her routine visit to a mother after the birth of a child.

During the year the clinic at Kings Hall was closed but new ones were opened at Trafalgar Street Undenominational Church and at Ashwell Avenue School.

Vaccination against Smallpox. During 1958, 1,690 infants were successfully vaccinated before reaching one year of age—1,002 were vaccinated by private medical practitioners and 688 at Health Department Clinics. This compares with 1,699 (968 by private medical practitioners and 731 at Health Department Clinics) vaccinated in the previous year.

The following summary shows the numbers of successful vaccinations and re-vaccinations carried out during 1958.

Age at date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	TOTAL
Number Vaccinated ...	1,690	71	42	39	115	1,957
Number re-vaccinated	1	—	5	29	206	241

The age in months of those under 1 year at the time of vaccination is shown below :—

Successful primary vaccination of infants under 1 year

Age in months when vaccinated													
	0	1	2	3	4	5	6	7	8	9	10	11	Total
Clinics	—	11	27	69	68	43	158	117	72	61	37	25	688
Private Doctors	4	157	192	246	111	92	80	45	31	24	16	4	1,002
Total	4	168	219	315	179	135	238	162	103	85	53	29	1,690

22 infants who failed to show any reaction after a first vaccination were not brought by their parents for a second attempt, and 79 infants did not show any reaction after a second vaccination.

Details of successful primary vaccinations recorded each year during the last five years are given below :—

Year	Age when vaccinated					Total
	Under 1 year	1 year	2 to 4 years	5 to 14 years	15 years and over	
1954	2,085	27	30	33	133	2,308
1955	1,993	54	55	45	113	2,260
1956	1,838	38	40	48	126	2,090
1957	1,699	35	44	37	128	1,943
1958	1,690	71	42	39	115	1,957

The following table shows the percentage of infants who were vaccinated by the end of the year following that in which they were born :—

<i>Year of Birth</i>	<i>Percentage Vaccinated at 31st December of following year</i>
1953	36.55
1954	37.00
1955	36.50
1956	34.15
1957	30.17

Diphtheria Immunisation. Facilities for immunisation against diphtheria continued to be provided at the Health Department clinics, but owing to the increased amount of work in connection with poliomyelitis vaccination, it was only possible to send the mobile unit to schools during eight weeks of the year. Consequently, although 128 primary immunisations and 3,186 reinforcing injections were given on the mobile unit, the total number of primary immunisations during the year fell from 3,566 in 1957 to 2,262 in 1958 and the number of reinforcing injections from 7,141 to 3,365.

Out of the total number of children under 15 years of age, estimated at 78,800, 73.5 per cent (58,013) had been immunised against diphtheria at the end of the year.

Immunised Child Population, 31st December, 1958.

<i>Age Group</i>	<i>Total Immunised</i>	<i>Percentage Immunised</i>
Under 1 year	186	
1-2 years	1,873	
2-3 years	2,969	
3-4 years	3,326	
4-5 years	3,538	
	— 11,892	44.5%
5-10 years	21,140	
10-15 years	24,981	
	— 46,121	88%

Medical practitioners who co-operated under the provisions of the National Health Service Act, 1946, were responsible for 1,083 initial immunisations, and gave 156 reinforcing injections. Full details of the work carried out are included in Table XII on page 110.

Propaganda was continued by the use of posters, leaflets and birthday cards, and by Health Education talks to local organisations by medical and other staff of the Health Department.

TABLE XII

DIPHTHERIA IMMUNISATION IN 1958

	Schick Test				Immunised after Test	Immunised without test			Immunisation not complete at 31st December		Schick Re-Test				Second Immunisation at 31st December	Second Immunisation not completed at 31st December	Reinforcing Injection		
	Schick Test					Immunised without test			Immunisation not complete at 31st December		Schick Re-Test						Diphtheria Antigen	Combined Antigen	Total
	No.	Neg.	Pos.	N/K		Diphtheria Antigen	Combined Antigen	Total	Diphtheria Antigen	Combined Antigen	No.	Neg.	Pos.	N/K					
Immunised by Local Health Authority :																			
Adults (15 years and over)	16	7	5	4	5	3	—	3	—	—	—	—	—	2	—	2	—	2	
Schoolchildren (5 to 15 years)	—	—	—	—	—	178	—	178	284	—	—	—	—	—	—	3,198	—	3,198	
Children (under 5 years)	—	—	—	—	—	998	—	998	153	—	—	—	—	—	—	9	—	9	
Immunised by Private Doctors	13	7	6	—	6	713	370	1,083	—	—	—	—	—	—	—	110	46	15	
TOTAL	29	14	11	4	11	1,892	370	2,262	437	—	—	—	—	2	—	3,319	46	3,365	

Vaccination against Whooping Cough. The table below shows the number of whooping cough immunisations carried out during the year.

	<i>Immunised</i>	<i>Incomplete at 31st December</i>
Immunised by Local Health Authority :		
Adults (15 years and over)	—	—
School Children (5-15 years)	2	—
Children (under 5 years)	1,845	393
Immunised by Private Doctors	465	—
Total	2,312	393

No reinforcing injections were given.

It is pleasing to report that there is a substantial increase in the numbers of pre-school children being immunised against this disease.

Throughout the year special vaccination and immunisation sessions were held at the East Hull and West Hull Clinics and facilities continued to be available at other Maternity and Child Welfare Clinics in conjunction with Infant Welfare care. Owing to the poor attendances at the North Hull Clinic the special immunisation sessions were discontinued.

Vaccination against smallpox and immunisation against diphtheria and whooping cough are available at the following clinics free of charge :-

St. Martin's Church, North Road	Each Monday at 2-0 p.m.
Nestor Grove Clinic	Each Monday at 2 p.m.
Undenominational Church, Trafalgar Street	Each Monday and Wednesday at 2 p.m.
Church of the Ascension, Priory Road	Each Monday and Friday at 2 p.m.
Mission Hall, Carlton Street	Each Tuesday at 2-0 p.m.
Methodist Church Hall, Preston Road	Each Tuesday at 2-0 p.m.
Methodist Church Hall, Potterill Lane, Sutton	Each Tuesday at 2-0 p.m.
East Hull Clinic, Morrill Street	First Tuesday in each month at 2-0 p.m.
St. Philip's Church, Amethyst Road	Each Wednesday at 2-0 p.m.

St. Nicholas Church, Pickering Road	....	....	Each Wednesday at 2-0 p.m.
Newland Methodist Church, Newland Avenue	....	....	Each Wednesday and Friday at 2-0 p.m.
North Hull Clinic, Ellerburn Avenue	....	....	Each Thursday at 2-0 p.m.
St. Michael's Church, Holderness Road	....	....	Each Thursday at 2-0 p.m.
West Hull Clinic, 69 Coltman Street	....	....	First and third Thursday in each month at 2 p.m.
Sykes Street Clinic	....	....	Each Thursday at 9-30 a.m. and Friday at 2-0 p.m.
Church of the Transfiguration, Albert Avenue	....	....	Each Friday at 2-0 p.m.
St. Ninian's Church, Chanterlands Avenue	....	....	Each Friday at 2-0 p.m.
Longhill School	....	....	Each Saturday at 9-30 a.m.
Ashwell Avenue School	....	....	Each Saturday at 9-30 a.m.

Vaccination against Poliomyelitis. At the end of 1957 a total of 44,575 persons were awaiting vaccination. To enable this extremely heavy programme to be carried out large supplies of Salk vaccine from Canada and the U.S.A. were supplied to the Authority by the Ministry of Health during 1958.

As the number of cases of poliomyelitis notified in the City during the summer months was extremely small, the vaccination programme was continued throughout the summer and in the holiday period.

Unfortunately, the small supplies of British vaccine available caused some set-back in the programme because many parents had expressed a preference for the use of British vaccine only. As this group had been waiting some considerable time for British vaccine, it was decided to offer to them the imported Salk vaccine tested only in the country of origin and also to offer such vaccine for a third injection to those children who had completed their primary immunisation in 1956 and 1957. Letters were sent to the parents of approximately 15,000 children requesting permission to use the Salk vaccine but only about 2,500 consented for their children to complete the course with this vaccine.

At the 31st December, 1958, out of a total of 62,000 children who had registered for immunisation since the scheme started in 1956, 46,177 had completed a course of two injections. During 1958 40,709 primary courses of two injections were completed, whilst 6,257 children received one injection only and 6,747 had been given a third injection.

Following discussions between Consultant Ear, Nose and Throat Specialists, Consultant Paediatricians and Medical Officers of the Health Department, it was decided that the increased risk of contracting bulbar poliomyelitis which occurred when children underwent tonsillectomy was a real one, and these children should be regarded as a priority group so far as immunisation was concerned. The risk of contracting bulbar poliomyelitis is undoubtedly greatest

during the first month after the removal of the tonsils but it would appear that the likelihood of contracting this form of infection persists for many years afterwards.

The Medical Research Council's investigators commenting on these observations confirmed that in Britain "Persons whose tonsils had been removed were more likely to develop the bulbar forms of poliomyelitis than those who had not had the operation even if years had elapsed after the removal of the tonsils and the onset of poliomyelitis." In view of the gravity of bulbar poliomyelitis, ideally no child should be subjected to tonsillectomy unless he has been previously vaccinated against poliomyelitis. The vaccination would give him an immunity that would substantially decrease the risks involved when the tonsils were removed. The Consultant Ear, Nose and Throat Surgeons agreed to make special note in future as to whether the children that they decided were needing tonsillectomy had been vaccinated against poliomyelitis or not. In the case of those children who had not been vaccinated they would point out to parents the desirability of having their children protected against the disease. General medical practitioners were also circularised and informed of these proposals. It was requested that when appointments were made for children to be seen by Ear, Nose and Throat Consultants with a view to tonsillectomy, it would be helpful to let the Specialist know whether or not the child had been vaccinated against poliomyelitis. In cases where vaccination had not been carried out practitioners were asked to point out to parents the desirability of having this done and of the arrangements which exist for vaccination.

The problem in Hull is in fact not as great as it might seem at first sight as some 75% of the children in the City have been registered for vaccination and a large number of those registered have already been vaccinated.

Since the priority system for children undergoing tonsillectomy was introduced in November, 24 applications have been received for vaccination to be carried out.

In September the Ministry of Health informed Local Health Authorities under Circular 20/58 that the offer of poliomyelitis vaccination should be extended to persons born in the years 1933 to 1942. The Ministry also stated that a third dose of poliomyelitis vaccine should be given to reinforce and prolong the immunity already given by the previous two injections. It was proposed that the third injection should in all cases be offered to persons not less than seven months after the second.

The Joint Committee on poliomyelitis vaccine recommended that primary vaccinations with two injections should take precedence in the programme over third injections, and that the third injections should be offered to persons in approximately the same order in which they were given their first two injections.

The approach to the older age group is naturally more difficult than to infants and school children but in an endeavour to register as many as possible

intensive publicity in the press was undertaken and persons were invited to register at mobile registration booths placed at strategic points in the City. In addition, the help of a number of firms and stores in the City was sought and as a result of their co-operation 8,000 registration cards were distributed to their employees. The Education Department was very helpful as always, and arranged the distribution of registration cards in evening schools, technical colleges and further education establishments, as well as to those pupils who were continuing to attend school beyond the age of 15 years.

In all, a total of 21,350 registration forms were distributed and by the end of the year, 5,700 persons in this 15—25 year age group had registered for vaccination. Of this total, 2,211 had received their first injection by the end of December. The response by this group for poliomyelitis vaccination is very disappointing, particularly in view of the extremely high registration rate amongst the school children, and in an effort to improve the situation further, consideration is being given to the establishment of open clinics on Saturday mornings and evenings during the week. No appointment will be necessary for attendance at these sessions and persons willing to be immunised will be registered at the time they attend and the vaccination will be carried out immediately.

The increasing supplies of British vaccine and the regular supplies of Salk vaccine should ensure the smooth running of the programme during 1959, and arrangements have been made for about 10,000 injections to be dealt with each month.

Vaccination against Poliomyelitis, 1958.

Summary of persons vaccinated with two injections.

	At Health Department Clinics	By General Practitioners	Total
General Practitioners	—	75	75
Ambulance Staff, &c.	54	19	73
Expectant Mothers	149	119	268
1933 to 1942 births	12	26	38
1943 to 1953 ,,	25,214	7,967	32,281
1954 ,,	1,443	506	1,949
1955 ,,	1,607	698	2,305
1956 ,,	1,522	674	2,196
1957 ,,	993	482	1,475
1958 ,,	25	24	49
	31,019	9,690	40,709

Number having received one injection only—6,257

Number having received three injections—6,747



Central Ambulance Station—opened September, 1958



Central Ambulance Station—Interior of Garage

SECTION 27—AMBULANCE SERVICES

The outstanding event of 1958 was the opening of the new Ambulance Station, Osborne Street, on September 19th, by the Rt. Hon. Herbert S. Morrison, C.H., M.P., High Steward of the City and County of Kingston upon Hull. The Service became operational from the new building on October 18th, and during the course of the next few weeks all the vehicles and the workshops and repair section were brought into the Station from their previous sites in buildings scattered through the City.

Every year since the Ambulance Service commenced there has been an increase both in the mileage run and in the number of patients carried, and 1958 was no exception. The mileage run by the ambulances rose to 480,738 as compared with 466,408 in 1957, and the number of patients carried from 109,617 to 122,671. The mileage run by all the Department's ambulance and other transport increased from 633,111 to 653,174. The table below gives details of the work done by the Ambulance Service

	No. of Patients		Mileage	
	1957	1958	1957	1958
Ambulance Cases	50,162	59,148	260,877	278,879
Sitting Cases	59,455	63,523	205,531	201,859
Totals	109,617	122,671	466,408	480,738

The mileage run has increased by 3.1% compared with that in 1957, and the number of patients carried by 11.9%. The average mileage per patient has therefore fallen again from 4.25 miles to 3.91 miles per patient in 1958. This figure is well below that achieved by most comparable authorities and is very satisfactory.

The next table shows the number of patients conveyed to individual hospitals during the year, and it will be clearly seen that the great majority of the work of the Ambulance Service is devoted to the transport of out-patients to and from the Hull Royal Infirmary, the Kingston General Hospital and the Western General Hospital, and that the transport of children to and from St. Mungo House is also a large item. The transport of out-patients to and from the De la Pole Hospital rose sharply from 991 in 1957 to 5,457 in 1958, and shows signs of increasing still further.

NO. OF PATIENTS CONVEYED TO INDIVIDUAL HOSPITALS IN 1958.

	Admit- tances	Dis- charges	Trans- fers	Out- Patients.	
Hull Royal Infirmary	476	568	856	34,879	36,779
do. Sutton	1,146	1,700	239	191	3,276
Kingston General Hospital	2,382	921	141	30,918	34,362
Western General Hospital	1,617	401	235	3,936	6,189
Hull Maternity Hospital	2,035	581	117	—	2,733
Victoria Childrens' Hospital	450	226	287	4,246	5,209
Castle Hill Hospital	1,213	186	53	1,389	2,841
De la Pole Hospital	511	44	7	5,457	6,019
St. Mungo House	—	—	—	12,689	12,689
Out of Town Hospitals	655	335	12	1,328	2,330
Miscellaneous	122	70	135	9,917	10,244
Totals	10,607	5,032	2,082	104,950	122,671

Emergency Calls. During the year, 4,006 emergency calls were dealt with, compared with 3,783 in 1957. The next table shows the nature of the emergency for which the calls were made and the sites from which the patients were picked up. There was no Major Accident during the year. The number of fatal accidents transported during the year was 160.

Emergency Calls Received in 1958.

Nature of Emergency	Location of Emergency				
	Home	Docks	Industry	Streets	Miscel- laneous.
Injuries	891	185	254	960	266
Burns & Scalds	107	5	11	—	4
Collapse	259	33	80	282	57
Acute Illness	200	21	18	60	16
Poisoning, &c.	146	15	3	8	3
Miscellaneous	40	2	8	72	—
Totals	1,643	261	374	1,382	346

Midwifery Car Service. This Service covered a distance of 44,983 miles during the year, conveying midwives and delivering Minnit apparatus, resuscitators and Trilene apparatus on the midwifery districts.

Home Nursing Service. During the year this Service covered a distance of 52,082 miles. Certain of the District Nurses use Vespa motor scooters and there are now 14 of these in their pool.

Mental Health Service. In addition to the ordinary carriage of patients in ambulances for mental treatment, a total of 12,352 miles was run in respect of mental health services carried out under Section 28 of the National Health Service Act and under the Mental Deficiency Acts. During the year the Ambulance Service continued to convey children to and from St. Mungo House.

Mobile Immunisation Clinic. The heavy demands of the Poliomyelitis Vaccination programme prevented the Mobile Immunisation Clinic being used as much during 1958 as it has been during previous years, and in fact it only travelled a distance of 519 miles during the year as compared with 2,422 miles in 1957.

Mortuary Service. During the year 282 bodies were removed to the mortuary.

Delivery Van Service. The five delivery vans ran a total of 27,788 miles during the year, a considerable decrease on the mileage run in 1957, thus reflecting the advantages of having all sections of the Ambulance Service within the one Station.

Vehicles. During the year, three ambulances were replaced, two of these being retained by the Ambulance Service and converted for Civil Defence training thus enabling the Department to sell the two old Civil Defence training vehicles. The three new ambulances were designed to allow natural lighting through the roof, making the interiors of the vehicles more pleasant for the patient and allowing better lighting for the ambulance driver attendants to work in. All new vehicles were painted in two tone metalescent blue. At the end of the year the composition of the ambulance and transport fleet was as follows :-

22	Ambulances
2	Ambulances retained for Civil Defence Training only
12	Sitting Case Vehicles
4	Midwifery Service Cars
1	Mobile Immunisation Clinic
6	Vans
1	Food Inspection Branch Truck
1	Mortuary Service Vehicle
5	Other Cars
14	Vespa Motorscooters

Staff. The establishment of the Ambulance Service at 31st December was as follows :-

1	Chief Ambulance Officer
1	Deputy Ambulance Officer
1	Station Superintendent
4	Chargehands
2	Telephonists
3	Clerical Staff
27	Male Drivers (Days)
36	Male Drivers (Shifts)
12	Female Drivers (Shifts)
7	Maintenance Garage Staff
—	
94	Total
—	

All the driving staff continued to be trained in First Aid during the year and volunteers were trained in basic Civil Defence duties. The Chief Ambulance Officer and his Deputy continued the training of the staff of the Civil Defence Ambulance and Casualty Section, in liaison with the Civil Defence Officer.

SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis. See page 145.

A summary of the applications received for services provided under this Section is given in Table XIII page 120.

Recuperative Holidays and Convalescence. Reference to Table XIII shows that although the number of applications received during the year was much greater than in 1957 the number of applications granted was only 2 more. Of the 70 applications not granted, 35 were considered as not coming within the purview of the scheme, mainly because of age and infirmity, 29 applications were withdrawn, 5 were not eligible as they had had a recuperative holiday within three years, and 1 was cancelled on the patient's admission to hospital.

Of the 69 applications granted, 63 were accommodated at the Thornton Guest House, Bridlington, and the remainder at various convalescent homes. The advantage of having accommodation available at this Guest House again showed itself as many of the patients sent there would not have been suitable for admission to convalescent homes, and arrangements can be made for admission to the Thornton Guest House much more quickly.

Nursing Requisites. Articles are available on loan from the Department for patients who are being nursed or confined at home.

As will be seen from the following statistics, this service continues to expand, the number of articles loaned during the year and the number remaining on loan at the end of the year showing a considerable increase over the 1957 figures. As in previous years, patients' homes were visited by Health Visitors and others to check the necessity for continuation of loans and to advise on replacements &c : the District Welfare Officers again assisted in this aspect of the service.

The applications sent in during the year were in respect of the following illnesses and showed an increase of 140 over the 1957 total :

Confinement	....	....	....	....	172
Cancer	....	....	....	....	161
Senility	....	....	....	....	215
Cerebral hæmorrhage	....	....	....	....	256
Disease of the Heart	....	....	....	....	157
Tuberculosis	....	....	....	....	23
Fractures, Accidents, etc.	....	....	....	....	128
Diabetes	....	....	....	....	22
Pneumonia, Pleurisy	....	....	....	....	28
Asthma and Bronchitis	....	....	....	....	80
Rheumatism, etc.	....	....	....	....	119
Mental Deficiency	....	....	....	....	4
Others	....	....	....	....	335
Total					1,700

The number of articles dealt with was as follows :—

	<i>On loan at 31/12/57</i>	<i>Issued during 1958</i>	<i>On loan at 31/12/58</i>
Bedsteads and Cots	144	286	166
Lifting Poles for Bedsteads	10	12	11
Mattresses, Dunlopillo	92	156	98
Mattresses, Hair	115	243	130
Bedding, various items	1,614	3,318	1,951
Sheets, waterproof	280	776	371
Air Rings	156	281	137
Backrests	219	411	233
Bedpans, Urinals, etc.	367	954	442
Commodes	189	307	273
Dishes, jugs, etc.	20	18	9
Scales (Diabetic)	14	4	8
Wheelchairs	187	306	268
Sponge Rubber Cushions	16	39	28
Miscellaneous	338	602	472
Totals	3,761	7,713	4,597

TABLE XIII

NATIONAL HEALTH SERVICE ACT, 1946—SECTION 28
APPLICATIONS FOR THE PROVISION OF SERVICES OR THE LOAN OF ARTICLES

SERVICE	No. of Applications Received	TUBERCULOSIS CASES			OTHER CASES			TOTAL 1958		TOTAL 1957	
		GRANTED		*Not Granted	GRANTED		*Not Granted	GRANTED	*Not Granted	GRANTED	*Not Granted
		Free	On Full or Part Payment		Free	On Full or Part Payment					
Loan of Nursing Requisites (With effect from 1st April 1957, nursing requisites have been loaned free of charge.)	1,700	23	—	—	1,677	—	—	1,700	—	1,560	—
Provision of Extra Nourishment (Milk) 	111	103	—	8	—	—	—	103	8	165	14
Provision of Clothing 	123	111	—	12	—	—	—	111	12	125	6
Maintenance at Convalescent Homes 	139	—	—	1	5	64	69	69	70	67	27

* "Not Granted" includes all applications which were cancelled, not approved or withdrawn after approval.

Occupational Therapy. The staff of this Section consists of a full-time qualified Occupational Therapist and an unqualified Assistant, the latter being appointed in February. For knitting machine demonstrations a Demonstrator is available on a sessional basis as required.

Since the scheme was introduced three years ago it has been welcomed by Chest Clinics, Hospital Almoners, Social Workers and Health Visitors and many patients are referred for therapy through these channels but in all cases referred, a prescription form is completed by the consultant or medical practitioner in charge of the case.

The following table gives an indication of the cases on the register at the end of December, 1958 :-

Class	1957	1958
Pulmonary Tuberculosis and Respiratory Disorders	46	42
Neurological	29	40
General and Medical Orthopædic	32	33
Psychiatric	5	2
	<hr/> 112	<hr/> 117

From the statistics it is evident that the volume of work has been maintained during the year. The number of neurological cases referred for therapy has increased to 40 and of this total two thirds are persons handicapped with multiple sclerosis. Of the 42 cases suffering from respiratory disorders about four fifths are affected with pulmonary tuberculosis, but the number classified as suffering from tuberculosis has decreased considerably since the scheme started.

A small group of patients attend on Friday mornings at the Occupational Therapy Section at the Lowgate offices to work in company with others and attempt crafts which may be too messy or require too much supervision to be undertaken at home.

The provision of an exhibition stand at the Annual Chrysanthemum Show enabled the Occupational Therapy Section to display the numerous articles which are produced by home-bound patients under this scheme. Great interest was shown by the general public in these products and as a result of the display many orders were given and a substantial number of completed articles were sold.

Health Education and Publicity. Sixty lectures were given by officers of the Health Department on various subjects in the field of public health to mothers' unions, young wives' guilds, institutes, clubs, &c. This is twice the number given during 1957.

Home Safety. During May it was announced that the Home Secretary and the Minister of Health, being concerned at the number of burning accidents in the home, were to launch a national campaign in November, the theme being "Guard That Fire." The co-operation of all Local Authorities was sought in order to bring about the greatest possible impact on the minds of the public.

In furtherance of this campaign locally, publicity material was obtained in the nature of posters, "stickers" and leaflets and issues of the appropriate material were made to the Corporation Transport Department, the East Yorkshire Motor Services, the Electricity and Gas Board Showrooms, large stores in the City, shops selling fireplaces and to libraries. Posters and "stickers" were also supplied for display in various hospitals in the City and in the Chest Clinics and School Clinics and "stickers" were supplied to the Jameson Street Traders Association and three local breweries.

A local hardware firm displayed material in their window in the Market Place and in their showcase in Paragon Station.

Health Visitors arranged special displays of publicity material at the four main Maternity & Child Welfare Clinics, whilst posters were exhibited at all of the smaller clinic premises.

A campaign symbol slogan plate was supplied to the City Treasurer who kindly arranged for it to be fitted on the Department's postal franking machine.

The Committee of the Hull & East Riding Chrysanthemum Society allowed us the use of accommodation in the South Gallery of the Mortimer Museum during their Show at the City Hall on the 12th and 13th November and arrangements were made with the Chief Fire Officer for a joint display including the Fire Brigade's cinema show. This proved a great attraction and there was almost a "full house" at every showing of the film, in addition to which various types of home safety leaflets were distributed.

During the year 9 lectures were given on the subject of Home Safety to various organisations.

Following the receipt of Ministry of Health Circular 6/58, the Health Committee considered the question of co-ordination of home safety measures generally and, in particular, the formation of a local committee. Eventually, it was decided to establish a Home Safety (Advisory) Committee to advise the Health Committee, through its Care Sub-Committee, in regard to measures to be taken from time to time for the prevention of accidents in the home, and to facilitate co-ordination of the work of the Local Authority in its various capacities as affecting home safety.

It was agreed that, initially, membership of this Committee should be drawn from the Welfare Services, Housing, Education, Fire Brigade and Children's Committees as well as from the Health Committee itself. The Committee met for the first time on 3rd November.

Venereal Diseases. Treatment for cases of venereal disease arising in the City and port area continued to be available at the Mill Street Clinic which is administered by the No. 4 Hull (A) Group Hospital Management Committee of the Leeds Regional Hospital Board.

Resulting from a review of the follow-up of patients and the tracing of contacts it was agreed with the Consultant Venereologist that female cases should be dealt with by the nurse working at the clinic, who, in most cases, would have the advantage of being known to the patient. The follow up of male patients continues to be undertaken by one of the Health Department's male clerks.

The following table has been extracted from the Annual Return kindly furnished by Dr. C. P. Heywood, Consultant Venereologist :-

NUMBER OF PATIENTS ATTENDING THE MILL STREET CLINIC FOR THE FIRST TIME DURING 1958.

	Syphilis		Gonorrhoea		Other Conditions		Totals		Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	
Syphilis—Primary	3	—	—	—	—	—	3	—	3
Secondary	—	—	—	—	—	—	—	—	—
Latent in 1st year of infection	—	1	—	—	—	—	—	1	1
Cardio-Vascular	4	1	—	—	—	—	4	1	5
Of Nervous System	5	4	—	—	—	—	5	4	9
All other late or latent stages	1	1	—	—	—	—	1	1	2
Congenital—under 1 yr.	—	—	—	—	—	—	—	—	—
Congenital—over 1 yr.	—	4	—	—	—	—	—	4	4
Gonorrhoea	—	—	211	47	—	—	211	47	258
Chancroid	—	—	—	—	9	—	9	—	9
Lymphogranuloma venereum	—	—	—	—	—	—	—	—	—
Granuloma Inguinale	—	—	—	—	—	—	—	—	—
Non-gonococcal urethritis (males only)	—	—	—	—	151	—	151 ^a	—	151
Any other conditions requiring treatment	—	—	—	—	455	40	455	40	495
Conditions not requiring treatment	—	—	—	—	—	—	—	—	—
Conditions still remaining undiagnosed	—	—	—	—	—	—	—	—	—
	13	11	211	47	615	40	839	98	937

SECTION 29—DOMESTIC HELP

The administrative staff at the end of the year was one Home Help Organiser, one Assistant Organiser, and three full-time clerks.

The number of home helps employed at the end of December was 216 comprised as follows :-

53 women and 2 men employed full-time :

148 women employed regularly on a part-time basis, and

13 women employed casually.

Two training courses were held during the year for full time personnel, and 24 of the Home Helps attended these courses. They were enjoyed by all and proved most helpful.

It is pleasing to record that many of the Home Helps act as fairy godmothers to patients. This is particularly evident at Christmas time when, unofficially, it is often brought to the notice of the Home Help Organiser that various Home Helps have not only given extra service in their own time, but have also provided gifts of food, &c., for their patients.

Cases serviced included a maternity case of a woman completely blinded in an air raid. Service was commenced in the 4th month of pregnancy, due to the patient's disablement and the fact of losing her first child a year earlier. Our service continued until the baby was three months old and then gradually ceased. A Guide Dog has now been supplied through a voluntary association and is proving a wonderful help and companion to the patient as she is very active, normally doing all her own household duties, shopping, cooking, &c.

In June the maximum charge for the services of a Home Help was increased to 3/-d. per hour, although in most cases the charges were assessed according to income. The number of persons who received help free of charge was 1,068.

During the year 366 maternity cases were attended and 1,520 other cases received service. These numbers show an increase on previous years. Included in the latter figure were :-

[illegible]

MENTAL HEALTH SERVICE

(SECTIONS 28 AND 51)

The Service is administered by a Sub-Committee of the Health Committee consisting of eight elected representatives of the City Council. The Medical Officer of Health attends meetings and acts in an advisory capacity. Meetings are held monthly during the week preceding the meetings of the Health Committee.

Staff. At the end of the year the Mental Health Staff, working under the direction of the Medical Officer of Health, consisted of :

Establishment	Appointment	Name	Qualifications
1	Senior Medical Officer (Care and After-Care)	Dr. A. H. Fairlamb	M.B., B.S., C. & D.P.H.
—	Sessional Assistant Medical Officer	Dr. M. M. Bell	B.A., M.B., B.Ch., B.A.O., D.C.H., D.P.H.
1	Senior Mental Health Worker	Mr. E. Elliott*	Cert. of R.M.P.A., R.M.N.
9	Mental Health Workers	Mr. F. Branton* Mr. W. Forward* Mr. A. C. Willby* Mr. V. L. Wilson* Mrs. E. McCreddie* Miss B. M. Waters Mr. R. S. Quibell Mr. A. Sunderland Mr. J. A. Whyte	Cert. of R.M.P.A., R.M.N. Cert. of R.M.P.A., R.M.N. R.M.N. Cert. of R.M.P.A., R.M.N. Diploma in Social Studies R.M.N., R.F.N. Cert. of R.M.P.A., R.M.N. R.M.N., S.R.N.

*Authorised under Lunacy and Mental Treatment Acts.

Children's Occupation Centre (Holden Centre)

1	Supervisor	Mr. R. N. V. Shane	Diploma of National Asscn. for Mental Health
1	Senior Assistant Supervisor	Miss M. Webb	Diploma of National Asscn. for Mental Health
8	Assistant Supervisors	Miss P. J. M. A. Dutton Miss M. Clarkson Mrs. I. Beacher Miss E. Leavis Mrs. W. Hudson Mrs. M. M. Dainty Miss J. Hodgson Mrs. J. Hutchison (Temporary)	Diploma of National Asscn. for Mental Health

Male Adult Occupation Centre

1	Supervisor	Mr. H. Parsons	Cabinet Maker
4	Instructors	Mr. J. Shotbolt	Upholsterer
		Mr. A. Hides	Joiner
		Mr. A. Bolder	Cabinet Maker
		Mr. E. A. Whiting	Joiner

Female Adult Occupation Centre

1	Supervisor	Mrs. E. Townhill
1	Assistant Supervisor	Mrs. H. S. Thompson

Day Centre

1	Matron	Miss M. Hobson	S.R.N.
4	Attendants	Mrs. G. Greenwood	S.E.A.N.
		Mrs. A. Cawthorne	
		Mrs. D. Frankish	
		Mrs. M. Wiseman	

Co-ordination with Other Bodies. The close liaison existing between members of the Mental Health Section and the general practitioners, hospitals, the Industrial Rehabilitation Unit and particularly the Disablement Resettlement Officers of the Ministry of Labour, has continued during the year under review.

Mental Health Workers. Mental Health Workers are engaged in all aspects of community care for the mentally ill and mentally handicapped. Although certain members of the mental health team act as Duly Authorised Officers and are responsible for emergency admissions to hospitals, all members undertake pre-care and after-care of patients in their own homes.

Arrangements have been made for a Mental Health Worker to visit the De la Pole Hospital for two sessions a week. On this visit the officer has discussions with the Medical Superintendent and other medical staff about patients who are being considered for discharge into the community. As a result of this liaison between the Local Health Authority and the mental hospital staff several long stay patients have been found accommodation and are now living in the community. Frequent visiting by Mental Health Workers has done much to keep these people stabilized whilst living outside the hospital.

Two Mental Health Workers attend weekly sessions at Kingston General Hospital clinics where they work in close association with the Consultant Psychiatrist of this hospital. This arrangement is ideal as the social case worker is able to carry out the care and after-care as prescribed by the Consultant in charge of the patient. It also has the added advantage that these patients can be referred back easily to the Consultant's care if they show signs of relapse.



The Holden Centre for Mentally Handicapped Children



In general, the regular visiting carried out by Mental Health Workers to patients who have had mental treatment is welcomed by general practitioners and very often the Mental Health Service is contacted directly if the practitioner considers the home conditions are deteriorating or admission to hospital is considered advisable.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY

(a) *Preventive Care and After-Care (Section 28, National Health Service Act, 1946).*

Cases reported to the Mental Health Service during the year for action under Section 28 of the National Health Service Act, totalled 200, and the various sources from which the patients were referred are as shown in the table below :-

From Neurosis Clinics	....	....	....	68
From De la Pole Hospital	....	....	....	55
From Pashby House	....	....	....	51
From General practitioners and miscellaneous sources	....	....	....	26
Total				200

Of the 55 patients referred from the De la Pole Hospital, the majority have been dealt with by the Mental Health Worker who has visited the hospital for two sessions weekly.

The number of domiciliary visits carried out by Mental Health Workers in connection with the care and after-care of the mentally disordered increased considerably during 1958, the total being 2,846. This number shows an increase of 753 on the previous year, whilst the figure of 200 new cases referred for after-care is an increase of 34 on the 1957 total.

During the course of the year many elderly patients have been referred for advice and experience has shown that frequent informal visits are beneficial for this type of patient. In cases where there has been a reasonable doubt in the mind of the Duly Authorised Officer about the hospitalisation of an elderly patient, arrangements have been made for a domiciliary visit to be made by a Consultant Psychiatrist before any action has been taken to remove the patient to hospital. In the case of elderly psychiatric patients very often their condition improves after a short period of observation in hospital and they are able to return home, but once having returned to the community adequate care and visiting are essential.

As in former years discussion groups have been held by Mental Health Workers at the Lowgate offices. This has proved to be a very valuable and popular source of therapy with persons suffering from mental disorder. Similar groups started in the homes of patients have also proved to be popular amongst patients referred for after-care and a ready response has been made by them in offering their homes for this purpose. Such occasions are partly therapeutic and partly social and there is no doubt that the solitary patient benefits from the companionship and the formation of new friendships as well as being able to enter into group discussions about his own particular problems.

Pashby House. The activities in this Day Centre have increased greatly during the past twelve months and the total number of patients referred during the year amounted to 328. Of this total, 281 were accepted and attended, 13 were accepted but failed to attend, and 34 were referred immediately to out-patient clinics or to the De la Pole Hospital.

The arrangements for the staffing of this establishment is a joint effort between the Local Health Authority and the Regional Hospital Board. The medical and nursing staff of Pashby House are supplied by the Hull "B" Group Hospital Management Committee and the clinical work is supervised by the Consultant Psychiatrist who is responsible for deciding whether or not a patient should attend the Centre. Social case work, follow-up visits and after-care are the responsibility of the Local Health Authority's Mental Health Workers who visit daily and attend conferences with the medical staff. The patients' social club has had a successful year, having organised, in addition to weekly social evenings, a motor coach tour and a successful Christmas party.

The following statistical information has been supplied by the Group Secretary of the Hull "B" Group Hospital Management Committee :-

Total number of patients referred to Centre during the year	....	328
Total attendances during the year	....	9,296
Daily average attendances	....	37
Total discharges during the year	....	264
Number of out-patient attendances (April to December)	....	841
(No record of these kept during the first three months)		

Sources of Referral—

From General Practitioners direct	....	67
From domiciliary visits	....	68
From out-patient clinics	....	70
From De la Pole Hospital	....	49
From Mental Health Workers	....	40
Self-referrals	....	16
Seen in Western General Hospital and Sutton Annexe	....	11
From Industrial Rehabilitation Unit and Labour Exchange	....	5
From Hull Royal Infirmary and Sutton Annexe	....	2

Discharges—

To work and/or out-patient clinics	138
To De la Pole Hospital	45
Ceased attending	51
To Industrial Rehabilitation Unit	18
Entered other hospitals	8
Died	1
Left the City	1
Referred back to general practitioner	2
	<hr/>
	264
	<hr/>

(b) *Lunacy and Mental Treatment Acts.* The table given below is a summary of the work undertaken under these Acts during 1958. Figures for the previous year are in parenthesis.

Lunacy Act, 1890

Males Females Total

Admissions under Section 20—

To Western General Hospital	61	30	91	(82)
To De la Pole Hospital	77	186	263	(297)
	<hr/>	<hr/>	<hr/>	
Total	138	216	354	(379)

Admissions under Section 21—

To De la Pole Hospital	—	—	—	(2)
-----------------------------	---	---	---	-----

Admissions under Magistrate's Court Order—

To De la Pole Hospital	2	—	2	(5)
-----------------------------	---	---	---	-----

Admissions under Section 16 (Certified patients)
direct from own homes—

To De la Pole Hospital	1	3	4	(14)
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Mental Treatment Act, 1930

Admissions under Section 1 (Voluntary patients) —

To De la Pole Hospital	247	249	496	(446)
	<hr/>	<hr/>	<hr/>	
Total direct admissions	388	468	856	(846)
	<hr/>	<hr/>	<hr/>	

Change of Status

From Lunacy Orders to Voluntary Class—

At De la Pole Hospital	49	149	198	(193)
Western General Hospital	7	1	8	(6)

From Section 20, Lunacy Act, 1890 to Section 16—

At De la Pole Hospital	25	44	69	(83)
At Western General Hospital	12	6	18	(21)
From Section 20 to Temporary Class	—	—	—	(3)
Total	93	200	293	(306)

Removals

From Western General Hospital to De la Pole Hospital—

On becoming voluntary patients	6	1	7	(7)
On becoming certified patients	11	4	15	(9)
Under Magistrate's Court Order	2	—	2	(5)
From Western General Hospital to Broadgate Mental Hospital—				
As certified patients	2	—	2	(3)
	21	5	26	(24)

Miscellaneous

Voluntary and other cases in which advice and assistance were given	206	(379)
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Visits by Justices of the Peace to—

Western General Hospital	83	(71)
De la Pole Hospital	152	(148)
Homes	4	(18)

Property Notices to the Welfare Services Department under the National Assistance Act, 1948

Pre-care and after-care visits to homes	2,846	(2,093)
Transfers from other mental hospitals to De la Pole Hospital	—	(1)
Transfers from De la Pole Hospital to Fulborne Mental Hospital	1	—
Ineffective visits	107	(67)
Number of patients interviewed at Section offices	852	(420)
Clinics and Case Conferences attended	395	(206)

The statistics show that there is little variation in the amount of mental illness requiring in-patient hospital treatment. During the year under review, 856 patients were admitted to mental hospitals for treatment and as in former years the vast majority of patients were admitted directly to the De la Pole Hospital. Of the total number of patients admitted, 56% were hospitalised in accordance with Section 1 (Voluntary patients) of the Mental Treatment Act.

The number of admissions dealt with under Section 20 of the Lunacy Act shows a slight decrease and compared with last year 25 fewer cases were dealt with in this way.

Detailed information of sex, age grouping, and subsequent disposal of patients dealt with under Section 20 of the Lunacy Act is given below.

Age Periods in Years	No. admitted to hospital		Status changed to						Discharged from provisions of Lunacy and M.T. Acts within 17 days	
			Voluntary		Certified		Temporary			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
15-29	23	21	6	17	10	1	—	—	7	3
30-44	39	45	16	32	11	10	—	—	12	3
45-59	22	50	6	21	10	13	—	—	6	16
60-74	27	62	8	37	3	11	—	—	16	14
75-90	27	38	5	18	1	5	—	—	21	15
Totals	138	216	41	125	35	40	—	—	62	51

The admission figures show a preponderance of females and of the total number of cases dealt with more than half are under the age of 60 years. In the older age groups ranging from 60 to 90 it would appear that the psychiatric episode is often of short duration and about two-thirds of these patients are discharged from the provisions of the Lunacy and Mental Treatment Acts within 17 days of their admission.

Mental Health Workers are encouraged to give after-care to the elderly psychiatric patient and it has been shown during recent years that regular visiting of this type of patient does much to prevent a recurrence of mental breakdown.

(c) *Mental Deficiency Acts, 1913-38.* The number of mental defectives under statutory supervision under the Mental Deficiency Acts totals 593 which is an increase of 34 on the previous year's total.

The table below shows the number of cases reported during the past twelve months and also the number of patients who are at the present time accommodated in mental deficiency hospitals.

	Males	Females	Total
Cases reported as being " Subject to be dealt with "	27	38	65
Patients placed under Order of the Mental Deficiency Acts	1	—	1
Patients placed informally in Hospital	16	10	26
Patients awaiting permanent care	2	8	10
Patients under Guardianship	—	1	1
Patients under Supervision	281	312	593
Placed in Hospitals by Order of the Court	2	—	2
Removed from Statutory Supervision	3	—	3
Patients in Hospitals	255	167	422

In connection with the supervision of mental defectives living in the community 2,103 home visits were carried out. The regular visiting and advice given by the Mental Health Workers is greatly appreciated by parents and guardians.

Arising out of the Royal Commission's Report on the Law Relating to Mental Illness and Mental Deficiency 1954—1957, the Ministry of Health issued Circular 2/58 to all Local Health Authorities.

Authorities were advised that under the present law it was permissible for mental defective patients to be admitted informally to and receive care in mental deficiency institutions without the procedure laid down under the Mental Deficiency Acts being carried out, but in cases where informal admission was instituted there would be no power to detain patients so admitted. Local Health Authorities were still to continue to act as the normal channel for admission to mental hospitals and to assist in priorities and to provide medical and social reports on home circumstances where necessary. The new procedure outlined in Circular 2/58 did not alter the duties conferred on Local Health Authorities by Section 30 of the Mental Deficiency Act, 1913, as amended—to ascertain what persons within their areas were defectives "subject to be dealt with" under the Act and to provide supervision in the community in all suitable cases.

During the year, 26 informal admissions were arranged by the Department and it is interesting to note that only one patient was placed on Order under the Mental Deficiency Acts during this period. In this case action was taken under the Mental Deficiency Acts before Circular 2/58 was issued.

On two occasions, patients appeared before the Stipendiary Magistrate and each was committed to a mental hospital for one and two years respectively on a probation report. The usual procedure of certification under Section 8 of the Mental Deficiency Act was not used in either of these cases.

In accordance with the recommendations of the afore-mentioned Royal Commission, Hospital Authorities were asked to review and send to the Board of Control a recommendation for the discharge from Order of all cases in which they were satisfied that a patient could suitably remain in hospital on an informal basis. So far as Hull patients in hospital were concerned, 289 were retained on an informal basis and 108 remained under certificate. This change of status from the certified to the informal has not resulted in large numbers of patients requesting discharge from hospital or leaving hospital against advice.

Short-term Care, Circular 5/52. The demand for this type of care is increasing and during the year 63 patients were admitted to hospital for varying periods in accordance with this Circular. The maximum length of stay under the

provision of short-term care is two months. There tends to be an increasing number of requests for short-term care during the summer months, particularly when Occupation Centres are closed and parents wish to go on holiday. If this seasonal demand continues to increase it may well be that difficulties will arise in meeting all requests for short term care during the holiday periods.

At the request of Superintendents of mental deficiency hospitals, visits were made to patients on licence within the area and 50 progress reports were submitted to the hospitals in respect of these patients.

Of the 15 patients who reside in Hull and were on licence from one of the hospitals in the area, three patients had their licences revoked and were returned for further hospital care and training.

On 16 occasions Mental Health Workers attended the Juvenile and Stipendiary Magistrate's Courts to give evidence about mental defectives who had committed offences whilst under statutory supervision.

As in former years, great efforts were made by the Mental Health Workers to place mental defectives in suitable employment but owing to the rather high level of unemployment in the area, placement has been difficult. Nevertheless, they have been successful in obtaining employment for ten patients who are under statutory supervision. In some instances the demand for labour fluctuates on a seasonal basis and as a result of this, temporary employment can be found at certain times of the year. When the employment ceases every effort is made to re-admit the defective to one or other of the adult occupation centres.

Provision of Occupation Centres, &c. Three occupation centres and one day centre are provided for the care and training of mentally handicapped persons, the number of places available totalling 246.

Up to a maximum of 135 children between the ages of five and sixteen can be accommodated at the Holden Centre, which opened in 1957. Facilities are provided for the training of adult male mental defectives at a temporary centre in George Yard. Overcrowding at the centre was relieved to some extent in February when an annexe was opened in the former child welfare clinic premises on Sutton Road. The additional accommodation thus provided enabled the number of trainees on the register of the male adult centre to be increased to 47. Places for 24 adult female trainees are available at St. Mungo House, where, also, provision is made in the form of a Day Centre for 40 severely handicapped patients who are unable to benefit by attendance at a normal occupation centre. Patients who attend the Day Centre do so on alternate days, 20 attending each day.

It has been recognised for some time that the number of places and the accommodation available for the training and care of adult mental defectives were inadequate for the number resident in the City. By the end of the year, plans were well advanced for the erection of a new centre to accommodate approximately 200 adults of both sexes, preliminary discussions having taken place with officials of the Ministry of Health. The new Centre will be sited on Leads Road adjacent to the Holden Centre.

Numerous requests have been made from other Authorities to inspect the occupation centres in the City and during the year visits were paid by Dr. Gilbert, Medical Officer of Health, Melbourne, Australia, Dr. McCarthy, Medical Officer of Health, Cork, Eire, as well as the County Medical Officer of the East Riding and members of his Mental Health Sub-Committee. All visitors appear impressed by the comprehensive health services which have been instituted for the care of the mentally handicapped in the City.

St. Mungo House. This Day Centre continues to do extremely valuable work in dealing with low-grade defectives of all ages. Many patients who attend suffer with the dual disability of mental retardation associated with physical illness. However, due to the special care and attention which is given at this Centre some children make considerable progress and after a period of training develop sufficiently to attend the Junior Occupation Centre. Four children were transferred from the Day Centre to the Junior Occupation Centre during 1958. The work carried out at St. Mungo House is greatly appreciated by the relatives of patients who attend there. It relieves the parents of much of the anxiety and domestic problems which are associated with the bringing up of a severely sub-normal child.

On the 25th June, 14 patients were taken on a day's outing by the Matron and her staff and another 15 patients had a similar outing on the 2nd July. Both these outings were extremely successful and many letters of appreciation were received from the parents about this venture.

Female Adult Occupation Centre. During the year attendance was extremely good, there being no marked absence due to outbreaks of illness amongst the trainees attending.

Training in a variety of handicrafts is provided at this establishment. Silk and wool embroidery as well as tapestry work are very popular. Other activities include cane work, rug making and the making of artificial jewellery. The trainees have also undertaken the embroidering of blankets for the Ambulance Service. For recreation, discussion groups are held on numerous current topics.



St. Mungo House—Day Centre for Lowgrade Mental Defectives and Temporary
Female Adult Occupation Centre



Male Adult Occupation Centre Annexe, Sutton Road

Country dancing as well as physical education is taught but the limited space in the Centre severely restricts the type and amount of recreational activities which can be carried out.

A day's outing to Filey was organised by the Supervisor during June, reports indicating that it was a most enjoyable occasion which was greatly appreciated by all who took part.

Male Adult Occupation Centre. A total of 47 trainees are now attending this Centre for instruction. The attendance figures over the year show an average of 41 per day, which is extremely satisfactory. The increase of six trainees on the register, compared with last year, was made possible by the opening of an Annexe in the former Child Welfare Clinic at Sutton Road. The Annexe was opened in February and accommodates twelve trainees who attended on a weekly rota basis from the parent Centre at George Yard. The trainees receive instruction in horticultural techniques but when the weather is not suitable for gardening they continue with handicrafts in the building. The work of laying paths, preparing the ground, making herbaceous borders, and the cultivation of fruit trees and vegetables was carried out by the trainees during this first year. Owing to the bad weather during the summer, many of the out-door vegetables were of poor quality but the greenhouse, which was donated by the Hull Society for Mentally Handicapped Children, proved to be useful for seed cultivation, pot plants, &c.

The recreational facilities available at the Annexe for football, cricket and table tennis, form a welcome change from handicraft work and are greatly appreciated by the trainees.

The work of the parent Centre in George Yard includes such activities as basketry, rug making, weaving, stool making and simple wood work. The ready sale of goods and the large number of orders received testify to the workmanship and quality of the articles produced at this Centre.

Holden Centre. Since the Holden Centre was opened in 1957 the number of children attending has increased from 82 to 114 at the end of 1958. This total includes 15 children who are normally resident within the administrative area of the East Riding County Council, special arrangements having been made with the County Council to reserve this number of places for children living in the fringe areas around Hull.

During the year, 34 children were admitted to the Centre, but 13 who were already attending were transferred to other Centres in the City or left for a variety of reasons. The daily attendance of children is at times disappointing but this type of child is susceptible to upper respiratory infections, particularly during the winter months.

Open days were held on the 26th and 28th June. At these two functions parents were given an opportunity to see their children at work in the classrooms and to witness a display of the various types of activities which the pupils normally take part in during their daily attendance at the Centre.

Ambulance Service. Ambulances and other vehicles for mental health work continued to be provided by the Health Department Ambulance Service. The Ambulance personnel rendered valuable assistance by maintaining a smooth and helpful co-operation.

PART IV

INFECTIOUS DISEASES

TUBERCULOSIS

INFECTIOUS DISEASES

There was slightly more infectious disease in the City during 1958, 5,602 notifications being received as compared with 5,354 in 1957.

The outstanding features were the low incidence of poliomyelitis and an epidemic of measles.

The incidence of poliomyelitis was the lowest since 1946, only five cases being diagnosed, one of which, a man of 24 years, died. From May onwards measles became increasingly common and reached epidemic proportions during the third quarter of the year. It appeared to reach a peak during November and this was followed by a slight fall.

NOTIFICATION OF INFECTIOUS DISEASES—1958

Disease	TOTAL		Under 1 yr.	One year	2-4 yrs	5-14 yrs	15-24 yrs	25-44 yrs	45-64 yrs	65 & over
	Orig- inal	Corr- ected								
Diphtheria	5	1	—	1	—	—	—	—	—	—
Erysipelas	15	5	—	—	1	—	—	1	2	1
Scarlet Fever	330	328	4	8	83	226	5	1	1	—
Measles	4238	4239	150	450	1837	1795	4	3	—	—
Whooping Cough	77	74	5	8	35	26	—	—	—	—
Pneumonia (all forms)	480	357	24	19	27	33	16	43	110	85
Acute Encephalitis	2	2	—	—	—	—	—	2	—	—
Acute Poliomyelitis	10	5	—	1	1	2	1	—	—	—
Meningococcal Infection	1	1	—	1	—	—	—	—	—	—
Malaria	2	—	—	—	—	—	—	—	—	—
Dysentery	262	275	26	21	80	69	19	41	8	11
Ophthalmia Neonatorum	51	51	51	—	—	—	—	—	—	—
Pemphigus Neonatorum	—	5	5	—	—	—	—	—	—	—
Puerperal Pyrexia	123	169	—	—	—	—	93	75	1	—
Food Poisoning	6	—	—	—	—	—	—	—	—	—
Totals	5602	5512	265	509	2064	2151	138	166	122	97

Diphtheria. Only five cases of diphtheria were notified during the year and only one of these was confirmed, a marked improvement on the experience of previous years. All the cases were investigated as soon as the notifications were received and nose and throat swabs were obtained from the family and school contacts. These were all found to be negative.

A single confirmed case occurred in a girl of 18 months. She was found to be infected with a virulent strain of *C. diphtheriae mitis*. She was admitted to the Infectious Diseases Hospital and eventually made a full recovery after a prolonged illness.

The incidence of diphtheria in Hull during the last ten years is shown below :—

Diphtheria

Year	Kingston upon Hull			England & Wales
	Notifications received	Diagnosis Confirmed	Deaths	Diagnosis Confirmed
1949	38	2	—	1874
1950	25	4	—	959
1951	16	—	—	658
1952	11	—	—	372
1953	5	—	—	265
1954	17	1	1	166
1955	41	17	1	154
1956	25	7	—	51
1957	20	6	—	37
1958	5	1	—	79

It will be seen that although 1,874 cases of diphtheria were diagnosed in England and Wales during 1949, the number has fallen off very sharply every year since that date in the country as a whole so that in 1957 only 37 cases were diagnosed, although there was a slight increase to 79 cases in 1958. In contrast, the number of confirmed cases in Hull has fluctuated without falling in the same manner and Hull is therefore now unfortunately making a serious contribution to the national incidence of the disease. The most important method of controlling diphtheria is the immunisation of infants and children and vigorous efforts continue to be made to persuade parents of the importance of this procedure.

Scarlet Fever. There was a further slight increase in the incidence of Scarlet Fever in 1958, the number of corrected notifications being 328 compared with 298 in 1957. The disease continued to be very mild in character, only 78 cases

requiring admission to hospital compared with 125 in 1957. There were no deaths and no return cases and only 5% of the notifications were secondary cases, that is to say, only 5% contracted the disease from cases within the same family.

Measles. The expected biennial epidemic of measles began to appear two or three months ahead of time, an increase in the incidence of the disease being noticed as early as May and the peak being reached in November. By the end of the year 4,238 notifications had been received (actual cases 4,239) compared with 3,029 in 1957 and the table below shows the rise and fall of notifications each quarter during the last three years.

Measles

Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
1956	70	515	952	2014
1957	2628	308	83	10
1958	11	227	873	3127

The following table shows the distribution of cases by age and sex :—

Age	0	1	2	3	4	under 5	5-9 yrs	10-14 yrs	Over 15	Total
Males	84	243	299	344	324	1294	901	5	3	2203
Females	66	207	244	327	298	1142	877	12	5	2036
TOTAL	150	450	543	671	622	2436	1778	17	8	4239

It will be seen that whereas the sex distribution is almost equal, more than half the cases occur under the age of 5 years. Although there was only one death in 1958 measles, together with whooping cough, remains the most dangerous and unpleasant of the infectious diseases that commonly affect young children.

Whooping Cough. The number of notifications of whooping cough fell sharply in 1958 from 504 to 74. This is the lowest number that has been recorded since whooping cough became statutorily notifiable in 1939 and for the third year in succession there were no deaths. It is hoped that the increasing use of immunisation against whooping cough will result in a further improvement in the position.

Dysentery. There was a reduced incidence of dysentery in 1958, the number of notifications received being 262 (as compared with 602 in 1957) and the number of confirmed cases 231. 154 of these cases occurred in the last quarter of the year. A further 44 cases were found to be due to *Salmonella* infections (q.v.).

The only strain of *Shigella* isolated was *Sonnei*, neither *Flexner* nor *Shiga* having been isolated in this City for many years, and clinically the cases ran a mild course.

Most of the cases were single or family outbreaks but a few larger outbreaks occurred. The most troublesome of these was in our Day Nursery in Pearson Park.

Pearson Park Day Nursery.

Towards the end of November a few children in the Nursery developed diarrhoea. Rectal swabs were taken and *Shigella Sonnei* was isolated. All the children and staff at the Nursery were then swabbed and eventually a total of 24 children and 7 of the Student Nursery Nurses were found to be infected. All the infected children and nurses were excluded from the Nursery and referred to their own doctor for treatment, the doctor being notified directly of the findings. After treatment had been completed further tests were made and the infected children and adults were only allowed to return to the Nursery after three negative results had been received. The infection took a considerable time to control, some children still being excluded when the Nursery was closed for Christmas.

Northumberland Avenue Nursery School.

At the beginning of November investigation of a case of dysentery revealed that two children in a family who were attending Northumberland Avenue Nursery School were infected with dysentery. Enquiries at the Nursery showed that four children and one nurse were absent and these were followed up in their homes. Strict hygienic precautions were instituted in the School but before the infection could be brought under control a total of 16 children and one nursery student contracted it. The infection was finally controlled before Christmas.

It must be emphasised that the control of dysentery is entirely dependent on the willing co-operation of all concerned in reaching a very high level of personal hygiene. It is essential that the hands should be thoroughly washed after using the toilet and before meals. The infection spreads with great rapidity when hygienic standards fall. While children usually develop acute diarrhoea, adults may only suffer from looseness of the bowels for a day or less and often do not realise that they have contracted the infection. Once a child or an adult has be-

come infected they commonly excrete the organism for 2—3 weeks and during the whole of that time may infect others unless they keep their hands and their habits scrupulously clean. The conversion of sanitary conveniences to the water carriage system has helped to eradicate several diseases but only personal hygiene counts in the prevention and control of dysentery.

Food Poisoning. Six cases of food poisoning were notified by medical practitioners during the year and on a further eight occasions the Department was informed that it was suspected that food was implicated as a cause of disease. All 14 cases were thoroughly investigated but it was only possible to demonstrate in one case that food was the cause of the trouble. This was the case of a boy $2\frac{1}{2}$ years old who ate some sausage one night and was taken ill at 4 a.m. the next morning with diarrhoea and vomiting. It was found that no-one else in the family had eaten sausage and bacteriological investigations revealed that some uncooked sausage left over from the previous night was infected with *Salmonella typhimurium*. It was not possible to demonstrate how the sausage became infected; the butcher's shop that supplied it was clean and hygienically managed and the staff concerned were all healthy and free from infection.

In a further 44 cases originally diagnosed as dysentery investigations led to the identification of *Salmonella* infections in children or their families, 32 of the cases being in children under the age of 15 years. Careful enquiries were made in all cases but in none was it found possible to identify the source of infection.

Nearly all *Salmonella* infections result from the use of unsound food or from contamination of sound food and the reason that difficulty is experienced in proving that the organisms were transmitted by food, that is to say that food poisoning has occurred, is that it is usually several days after consumption of food before the symptoms occur. By then the offending food has been destroyed, and there is only indirect evidence of the route through which the infection was contracted. Food poisoning may be due to a number of organisms other than the *Salmonella* group but in 1958 no outbreak due to these other types occurred.

Only four types of *Salmonella* were identified during 1958. The greatest number, 37 cases, was caused by *Salmonella typhimurium*, 2 cases of infection by *Salmonella* Derby occurred, 4 were due to *Salmonella* Schwarzengrund and one to *Salmonella* Senftenburg.

Gastro-Enteritis. There was little change in the incidence of gastro enteritis during 1958, 98 cases being voluntarily notified in children under the age of 2 years, as compared with 99 in 1957. After correction, the total number of cases

diagnosed during the year reached 105 as compared with 117 in 1957 and there was one death. Gastro enteritis is only of importance in infants and young children. In these age groups it is often a highly infectious and dangerous disease that demands careful measures for its control. In this City no hospital outbreaks occurred during the year and the majority of cases were single ones.

Paratyphoid Fever. No cases of paratyphoid fever were brought to the notice of the Health Department during 1958.

Poliomyelitis. There was a low national incidence of poliomyelitis in 1958 and this was reflected by the experience in Hull. Only 10 cases were notified here and 5 of these were subsequently found to be suffering from some other disease. The five confirmed cases were all paralysed to some degree and they all received treatment in the Castle Hill Infectious Diseases Hospital. One of the 5 cases, a man of 24 years, died of the disease.

Meningococcal infection. Only one case was notified during the year, a child of 18 months, who made a complete recovery.

Acute Encephalitis. There were three notifications of acute encephalitis during the year. Of these one was subsequently found to be suffering from another disease, one was only diagnosed at post-mortem and the third was first thought to be suffering from another disease but was later found to have acute encephalitis.

Glandular Fever. 18 cases of glandular fever were brought to the notice of the Health Department during 1958. All were admitted to the Infectious Diseases Hospital and made uneventful recoveries.

Infective Hepatitis. There were only 10 cases notified during the year compared with 15 in 1957 and 28 in 1956. Nine were treated in the Infectious Diseases Hospital. One of the cases was subsequently found to be suffering from pneumonia and another from appendicitis.

Mumps. There were 98 cases notified and all but 2 were treated at home. There were no deaths.

Weils Disease. There were no cases notified in 1958. This is the second year in succession that no cases of this disease have been diagnosed. In 1956 there were 6 cases and one death and in 1955 one case, a school girl who died.

Chickenpox. There were 1,050 cases notified during the year.

Bacteriological Examinations. Bacteriological work in connection with infectious diseases was carried out by the Public Health Laboratory Service at the laboratory in the City.

The following are the details of the work carried out in the year.

Faeces	779	Throat Swabs	303
Nasal Swabs	300	Rectal Swabs	116

Medical Examination of Suspected Infectious Cases. The services of medical officers of the Health Department continued to be available to general practitioners, to assist in the diagnosis of any doubtful case of infectious disease, 43 such visits being made.

Acute Rheumatism Regulations. These regulations make notifiable any case of acute rheumatism, as defined by the Regulations, in a person under 16 years of age resident in Kingston upon Hull. During 1958, 11 notifications were received.

Disinfecting Station. During 1958, 13,706 articles of bedding &c., were disinfected, 527 houses were disinfected and 175 verminous persons were cleansed.

In 1948 a substantial part of the Disinfecting Station was transferred to the Ambulance Service, most of the garages being used for ambulances and the old isolation cottages being converted into offices. With the opening of the new Central Ambulance Station in September, therefore, the accommodation at the Disinfecting Station became surplus to requirements. As the boiler which fed the steam disinfectors was due for renewal during 1958, the Health Committee took the opportunity of reviewing the whole question of disinfection and disinfection. In spite of the remarkable decline in the incidence of infectious disease, it was felt that the need for facilities for disinfection would remain for some years to come.

The average of four baths per week, however, was not considered sufficient to maintain the large bath unit at the Station. The Committee decided, therefore, that the disinfection block should be adapted to provide, in addition to the two large disinfectors, a waiting room, one bathroom and dressing and rest rooms for persons needing disinfection. The erection of two small outbuildings (one for the Superintendent's office and store and one for the men's messroom, bathroom and lavatory) would complete a compact and economical unit of sufficient size to meet the normal requirements of the Department.

At the end of the year the plans for this scheme were being drawn up. When completed, a substantial area will become available for disposal by the Town Planning Committee.

TUBERCULOSIS

Incidence and Mortality. In the following table are given new cases and deaths arranged in age periods, respiratory and non-respiratory figures being shown separately.

NEW CASES AND MORTALITY

Age Periods	NEW CASES*						DEATHS					
	Respiratory		Non-Respiratory		Totals		Respiratory		Non-Respiratory		Totals	
	M.	F.	M.	F.	1958	1957	M.	F.	M.	F.	1958	1957
0- 1	1	1	—	—	2	6	—	—	—	—	—	—
1- 5	2	3	1	—	6	15	—	—	—	1	1	1
5-10	5	2	—	—	7	9	1	—	—	—	1	—
10-15	6	5	—	—	11	12	—	—	—	—	—	1
15-20	6	11	1	—	18	27	—	—	—	—	—	1
20-25	9	6	—	3	18	22	—	—	—	—	—	—
25-35	13	21	—	6	40	52	3	1	—	1	5	3
35-45	14	21	1	—	36	42	2	2	—	—	4	9
45-55	21	8	—	1	30	30	5	—	—	1	6	6
55-65	18	1	2	—	21	25	5	2	1	—	8	15
65 and over	9	—	—	—	9	16	9	2	—	—	11	13
1958	104	79	5	10	198	—	25	7	1	3	36	—
1957	140	101	7	8	—	256	37	9	1	2	—	49

* Primary notifications and other new cases coming to the knowledge of the Medical Officer of Health.

Death-rates. The death-rate per 1,000 of the population from respiratory tuberculosis was .11 and from non-respiratory disease .01, giving a total death-rate of .12 for all forms of tuberculosis.

Year	Deaths in Kingston upon Hull			Death-rate per 1,000 Population	
	Respiratory	Non-Respiratory	Total	Kingston upon Hull	England and Wales
1908	326	162	488	1.79	1.59
1918	403	135	538	2.18	1.69
1928	301	58	359	1.20	0.93
1938	246	39	285	0.89	0.64
1948	174	26	200	0.68	0.51
1954	75	6	81	0.27	0.18
1955	56	4	60	0.20	0.15
1956	44	4	48	0.16	0.12
1957	46	3	49	0.16	0.10
1958	32	4	36	0.12	0.10

Notifications. The following table shows the total number of new cases brought to light during the last five years.

YEAR	NEW CASES				TOTAL NEW CASES
	From Primary Notifications		On Information from Other Sources		
	Respiratory	Non- Respiratory	Respiratory	Non- Respiratory	
1954	326	30	20	3	379
1955	296	26	10	1	333
1956	254	25	13	4	296
1957	231	13	10	2	256
1958	177	12	6	3	198

FORMAL NOTIFICATIONS

[illegible]

SUPPLEMENTAL RETURN

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period from the 1st January to the 31st December, 1958, otherwise than by formal notification.

Age Periods	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 and upwards	Total Cases
Respiratory—												
Males	—	—	—	—	—	—	—	—	1	2	2	5
Females	—	—	—	—	—	—	—	—	1	—	—	1
Non-Respiratory—												
Males	—	—	—	—	—	—	1	—	—	1	—	1
Females	—	—	—	—	—	—	—	—	1	—	—	2
Total	—	—	—	—	—	—	1	—	3	3	2	9

SOURCE OF INFORMATION	No. of Cases	
	Respiratory	Non-Respiratory
From Local Registrars	3	2
Transferable Deaths from Registrar General	—	—
Posthumous Notifications	3	1
	6	3

Examination of Contacts. The following table shows the number of new contacts examined by the medical officers of the Chest Clinics during 1958 and previous years :—

<i>Year</i>						<i>No. of Contacts</i>
1954	....	....	....	....	....	588
1955	....	....	....	....	....	596
1956	....	....	....	....	....	642
1957	....	....	....	....	....	664
1958	....	....	....	....	....	647

The total of 647 contacts who attended the Chest Clinics during the year is estimated to be little more than two thirds of all family contacts of the 198 new cases of tuberculosis notified in 1958, but many other adolescent and adult contacts accepted the offer of chest x-ray examination by the Mass Radiography Unit at its base in the City. "Contact" examination is voluntary; there are always those who either decline or find it inconvenient to attend the Clinics, or default for other reasons, *e.g.*, loss of working time and wages incurred. The fact that no x-ray facilities yet exist at the Chest Clinics, involves each contact making two initial attendances, firstly at a Chest Clinic and secondly at an appropriate x-ray centre. "Contact" examination is an important means of detection of hitherto unsuspected or unknown disease in a tuberculous family or household. It is difficult to extend it, under present legislation, to other groups—work, school, social—with whom the "index" case was associated before the illness was discovered, the main impediment being that "Notification" and other action taken subsequently is necessarily confidential.

B.C.G. Vaccination of Contacts. All child contacts are offered B.C.G. protection after preliminary tuberculin "Heaf" testing and during 1958, 247 children were vaccinated under this scheme.

B.C.G. Vaccination is also given to young nurses and laboratory workers who are negative mantoux-reactors.

"Contact" examination including chest x-ray, to embrace the parents and others in families of "tuberculin-positive" thirteen-year-old school children and "toddlers" is a valuable means of tuberculosis case-finding. It could use-

fully be extended to families of school children of all ages, provided that routine skin-testing was part of the statutory medical examinations while at school.

Already, several cases of respiratory tuberculosis in parents have been brought to light by the scheme instituted in 1956 whereby parents are invited to take their child to a Child Welfare Clinic on its second, third and fourth birthday for a health check-up including tuberculin skin-testing. The Chest Clinic is informed of reactors, and quickly offers clinical and x-ray examination to other members of the family. Infants and very young children, if "tuberculin positive," have become infected nearly always by contact within the family circle, with a human source of tuberculosis.

Chest Clinics. The Hull "B" Group Hospital Management Committee maintains two Chest Clinics in the City to deal with patients resident within Kingston upon Hull and the adjacent area of the East Riding. In addition, commencing in October, full out-patient facilities have been made available at the Western General Hospital : all new cases referred by the general practitioners are now examined there.

The following details for 1958 and previous years relate only to Hull patients under the care of the Chest Clinics :-

Year	Number of Cases on Register 31st December	Examinations	Total Home Visits by T.B. Health Visitors
1954 	1,790	8,961	8,735
1955 	1,800	8,805	8,201
1956 	1,851	8,249	6,227
1957 	1,896	8,182	8,219
1958 	1,884	9,085	7,238

Mass Radiography. In 1958 the Hull Unit (2C of the three Regional M.M.R. Units) worked in the East and North Ridings, York and Hull. The medical work was shared by the four doctors on the Chest Clinic Staff, under the direction of the Consultant Chest Physician.

Of the 46,437 persons x-rayed by the Unit during the year, 25,908 persons were domiciled in Hull and District and were composed of the following groups :-

Mental Patients	324
Hospital Management Committee Staffs	695
" Mantoux " Positive School Children (Hull)	727
Training College Students and Entrants	391
University Students and Staff	1,074
" Remploy " Employees	41
Ante-Natal Sessions	520
General Practitioners' Sessions	4,553
" Mantoux " Positive Contacts (Hull and Haltemprice)	533
Chest Clinic " Contacts "	494
Hull Corporation Employees	3,862
Civil Servants and Nationalised Industries	2,670
Industrial Groups	4,696
Old Age Pensioners	88
Public Sessions	4,990
Haltemprice " Mantoux " Positive Scholars	136
Other Local Government Employees	114
	<hr/>
	25,908
	<hr/>

General Practitioners' sessions held at the Dispensary Buildings, Baker Street, continued to provide an excellent means of case-finding, the number of cases of active pulmonary tuberculosis found representing a rate per thousand nine or ten times higher than that found in routine surveys of the general population. These sessions, held fortnightly on a Saturday morning, are popular, and well attended.

It is thought that Hull should have a static unit based in the City throughout the whole year so that more time could be spent in the examination of selected industrial and other groups.

X-Ray Work at the East Hull Clinic. Arrangements continue to be made for X-ray examinations as follows :

- (a) Staff working in contact with organised groups of children ;
- (b) New entrants to the Local Government Service (including Fire Brigade and Police Force) ;
- (c) New entrants to the Corporation's Superannuation Scheme ;

- (d) Corporation Staff in respect of whom X-ray examinations were thought desirable in connection with medical examinations for the Sick Pay Scheme, or their fitness to continue in their posts, etc.

294 examinations were carried out in connection with (a) above, and 579 examinations were made in connection with (b), (c) and (d), the cost of these latter being refunded by the Committees concerned.

The total of 873 X-rays were examined by Medical Officers of the Health Department, and in a few instances the Consultant Chest Physician was referred to for his opinion regarding the films.

Domiciliary Treatment. Mention must be made of the invaluable work done by the Home Nursing Service whose nurses visit, on a doctor's request, those home-bound tuberculous patients who need injections of antibiotic drugs.

In the past year or two, many hundreds of domiciliary visits have been carried out by the nurses for this purpose alone ; at any one time, fifty patients or more in the City are under current treatment of this kind in their own homes, the minimum course consisting of daily injections over a period of six weeks.

Hospital Admissions. At the Castle Hill and Raywell Sanatoria, Cottingham, which serve the Hull area, there is a total of three hundred beds available for chest cases and of these thirty-six are in use for non-tuberculous patients. During 1958, 336 Hull patients were admitted for treatment. There is no waiting list for admission. The Chest Clinic has a lien of four female and four male beds in acute medical wards in Western General Hospital.

Rehabilitation—Special Remploy Factory. This factory continued with success its work of rehabilitation during 1958, the number of men and women working on the 31st December being approximately 95. Since the factory opened in February 1949, 251 workers have been employed, some temporarily, later passing on to other work or vocational training outside.

During the year, the health of the workers was satisfactory on the whole, the relapse rate was not excessive, whilst morale and team-spirit were on a high level, as in previous years. The Factory is visited weekly by a member of the Chest Clinic medical staff.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

Details of the B.C.G. Vaccination Scheme for 13 year old school children is referred to separately in the School Health Service Section of this Report. The following tables, however, give the results obtained and the numbers of children vaccinated during the year under review.

Table A shows the percentage of consents given for children resident within Kingston upon Hull and also for pupils who although not actually resident in the area were attending schools within the City. In the year 1958 about 73% of parents or guardians gave their consent for tuberculin test to be carried out and for vaccination to be performed if it was necessary.

Table B shows the results of tuberculin testing.

Table C gives details of the results of tuberculin testing and the number who were vaccinated in individual schools. It will be seen from this table that in 766 instances the course of B.C.G. Vaccination was not completed but arrangements are in progress to have these children dealt with early in 1959.

Table D gives an analysis of the results obtained at the different types of schools. A total of 2,131 children were found to be tuberculin negative and 533 to be tuberculin positive. It will be noted from these figures that following tuberculin testing 20% gave a positive reaction.

Table E shows the percentage of positive reactors in the various wards of the City and these figures are included in the statistical ward map of the City which is inserted after page 156.

This scheme has now been operating for five years during which time vaccination has been offered to 21,495 children in the 13 years age group. The parents of 15,975 children have consented to their children being vaccinated. By the end of 1958, 15,017 children had been tested, of whom, 3,872 had given a positive result to the skin test and, therefore, did not require vaccination. Out of the 11,145 who had given a negative result, vaccination had been carried out on 10,822. From 1954 to 1958, inclusive, therefore, 50% of all 13 year old school children have been given B.C.G. vaccine.

Since 1954 there has not been a single notification of pulmonary tuberculosis in a child resident in this City who has been vaccinated under this scheme. In comparison, however, there have been 19 notifications of pulmonary tuberculosis in children who, according to their ages at date of notification, were in their thirteenth year during the years the scheme has been in operation in this City but who did not take part in the scheme.

The scheme of B.C.G. vaccination can therefore be seen to have been completely successful. There have been no serious after-effects of any sort and it is expected that the immunity given by the vaccine should protect the children against tuberculosis for many years.

TABLE A

B.C.G. SCHEME—1958

	Number on Roll		Number of Consents		Percentage of Consents	
	Boys	Girls	Boys	Girls	Boys	Girls
Kingston upon Hull	2,361	2,037	1,707	1,524	72·30	74·82
Non-resident	96	48	79	38	82·29	79·17
Total	2,457	2,085	1,786	1,562	72·69	74·92

TABLE B

B.C.G. SCHEME—1958

	Number Tested Result Known		Number Positive		*Percentage Positive	
	Boys	Girls	Boys	Girls	Boys	Girls
Kingston upon Hull	1,337	1,230	266	240	19·90	19·51
Non-resident	65	32	21	6	32·31	18·75
Total	1,402	1,262	287	246	20·47	19·49

* Percentage of total number read.

Early 1958 being residue of cases from 1957

No. Tested	No. Positive	Percentage Positive of total number read	No. tested but not completed course
379	86	24·02	28

TABLE C

B.C.G. SCHEME—1958

School	No. on School Roll	No. of Consents	% of Consents	No. Tested and result known	No. Positive	% Positive	No. Negative	No. Vaccinated	Course not completed
Northumberland Avenue Special	34	26	76.47	18	4	22.22	14	14	8
Newland C. of E.	22	18	81.82	16	4	25.00	12	12	2
Marist College	63	49	77.78	32	6	18.75	26	26	17
Charterhouse High	66	52	78.79	39	6	15.38	33	32	14
St. Gregory's	23	18	78.26	10	3	30.00	7	8	7
Lincoln Street	18	16	88.89	9	1	11.11	8	8	7
High School for Building	34	26	76.47	21	6	28.57	15	14	6
St. Georges Road	22	20	90.91	19	1	5.26	18	18	1
Newington High	68	48	70.59	33	5	15.15	28	28	15
Ainthorpe	209	153	73.21	140	16	11.43	124	105	32
Wold Road	4	4	100.00	3	—	—	3	3	1
Kingston High	125	101	80.80	94	18	19.15	76	72	11
Eastfield High	123	74	60.16	68	9	13.24	59	53	12
St. Patricks	12	4	33.33	1	—	—	1	1	3
St. Charles	28	21	75.00	17	4	23.53	13	13	4
High School for Commerce	58	41	70.69	35	13	37.14	22	22	6
Endlike High	82	65	79.27	49	9	18.37	40	40	16
Fifth Avenue	127	98	77.17	81	15	18.52	66	66	17
Newland High	119	87	73.11	80	22	27.50	58	56	9
Cottingham Road Special	26	19	73.08	7	1	14.29	6	4	14
St. Andrew's High	60	38	63.33	30	7	23.33	23	23	8
Westbourne Street	64	36	56.25	23	6	26.09	17	17	13
Maybury High	114	90	78.95	59	18	30.51	41	40	32
Wilton High	103	81	78.64	62	10	16.13	52	49	22
Grammar	125	101	80.80	82	22	26.83	60	60	19
Wawne High	47	27	57.45	21	4	19.05	17	16	7
Faisley Street	51	33	64.71	27	2	7.41	25	24	7
Mersey High	100	75	75.00	48	10	20.83	38	37	28
Sir Henry Cooper	44	34	77.27	27	2	7.41	25	25	7
Francis Askew	160	102	63.75	92	12	13.04	80	76	14
East Mount High	39	34	87.18	25	8	32.00	17	17	9

Sutton Deaf	4	3	75-00	3	—	—	3	3	3	—
Sutton C. of E.	7	5	71-43	3	—	33-33	2	2	2	2
Southcoates High	57	49	85-96	38	10	26-32	28	28	28	11
Courtney Street	39	28	71-79	23	3	13-04	20	20	20	5
Barham High	127	104	81-89	77	10	12-99	67	66	66	28
Jervis High	91	81	89-01	55	8	14-55	47	47	47	26
Flinton High	124	99	79-84	84	19	22-62	65	55	55	25
Alderman Cogan	62	46	74-19	24	5	20-83	19	19	19	22
Greatfield High	50	39	78-00	28	6	21-43	22	22	22	11
Buckingham Street	41	26	63-41	21	6	28-57	15	15	15	5
St. Mary's R.C.	54	34	62-97	25	7	28-00	18	18	18	9
Craven Street	168	127	75-60	114	25	21-93	89	89	89	13
Wilberforce High	140	76	54-29	53	16	30-19	37	36	36	24
Thoresby High	95	70	73-68	59	8	13-56	51	47	47	15
Park Avenue Special	5	2	40-00	—	—	—	—	—	—	2
High School for Arts	48	34	70-83	34	8	23-53	26	24	24	2
Boulevard Secondary Modern	126	78	61-90	60	9	15-00	51	51	51	18
Riley High	150	117	78-00	105	19	18-10	86	83	83	15
Hymers	78	63	80-77	54	19	35-19	35	33	33	11
Fountain Road	86	68	79-07	46	14	30-43	32	32	32	22
Beverley Road	47	36	76-60	20	1	5-00	19	19	19	16
Constable Street	67	51	76-12	34	3	8-82	31	30	30	18
Malet Lambert	126	108	85-71	100	11	11-00	89	89	89	8
Estcourt High	113	95	84-07	86	28	32-56	58	50	50	17
St. Vincents	28	13	46-43	9	—	—	9	9	9	4
Pearson High	53	34	64-15	30	7	23-33	23	23	23	4
Sidmouth High	57	35	61-40	30	8	26-67	22	22	22	5
Chiltern Street	44	24	54-55	18	2	11-11	16	16	16	6
St. Wilfred's R.C.	39	31	79-49	24	2	8-33	22	22	22	7
St. Mary's Grammar	62	49	79-03	43	10	23-26	33	32	32	7
Pitman's College	—	—	—	—	—	—	—	—	—	—
Chapman Street	25	19	76-00	10	5	50-00	5	5	5	9
Clifton Street	20	17	85-00	10	1	10-00	9	9	9	7
High School for Nautical Training	42	36	85-71	28	7	25-00	21	19	19	10
Somerset Street	32	20	62-50	18	6	33-33	12	12	12	2
Bricknell High	65	40	61-54	30	5	16-67	25	24	24	11
Totals	4542	3348	73-71	2664	533	20-01	2131	2049	2049	766
Less Non-Residents	144	117	81-25	97	27	27-84	70	69	69	21
Residents of Kingston upon Hull	4398	3231	73-47	2567	506	19-71	2061	1980	1980	745

TABLE D

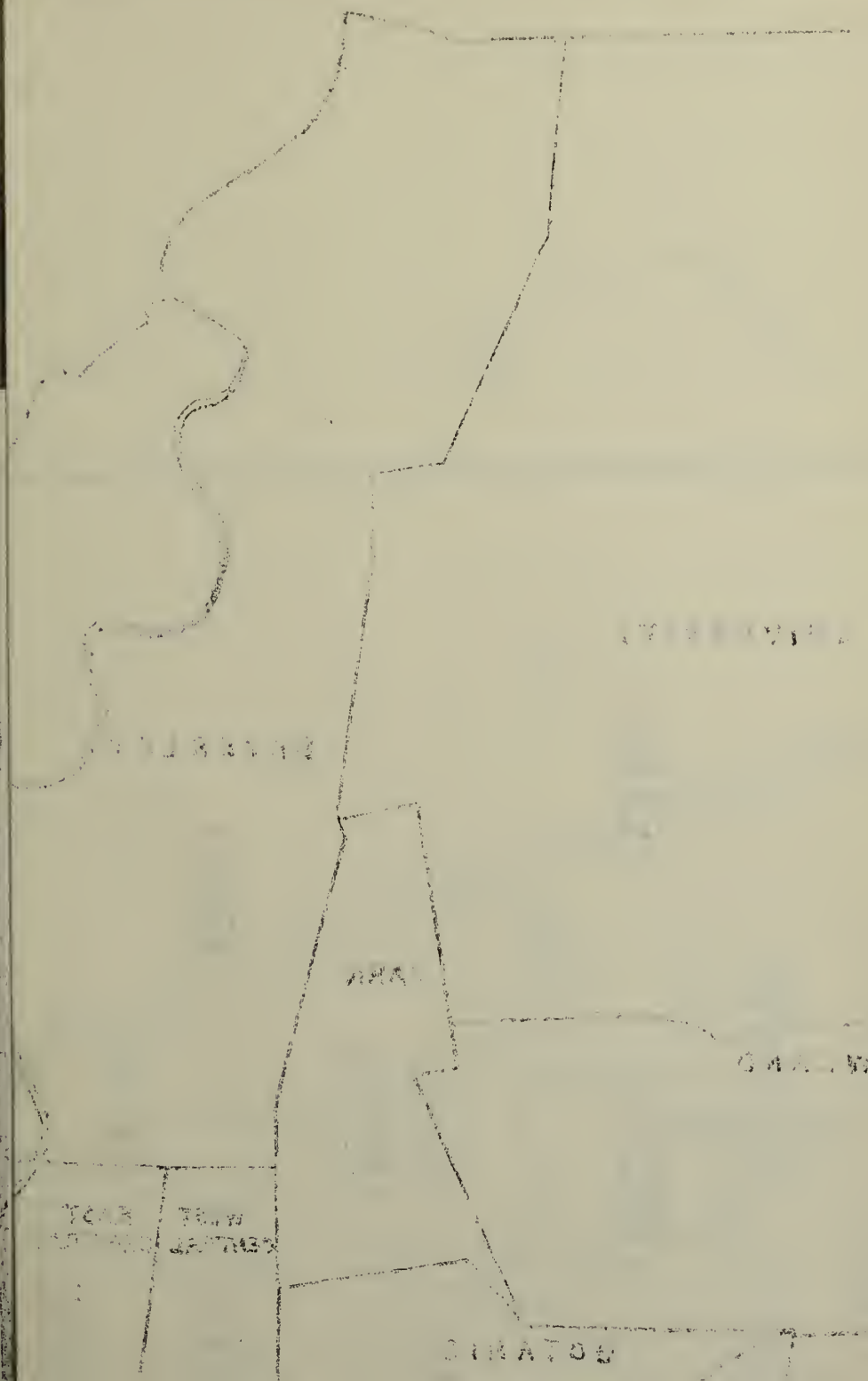
B.C.G. SCHEME—1958

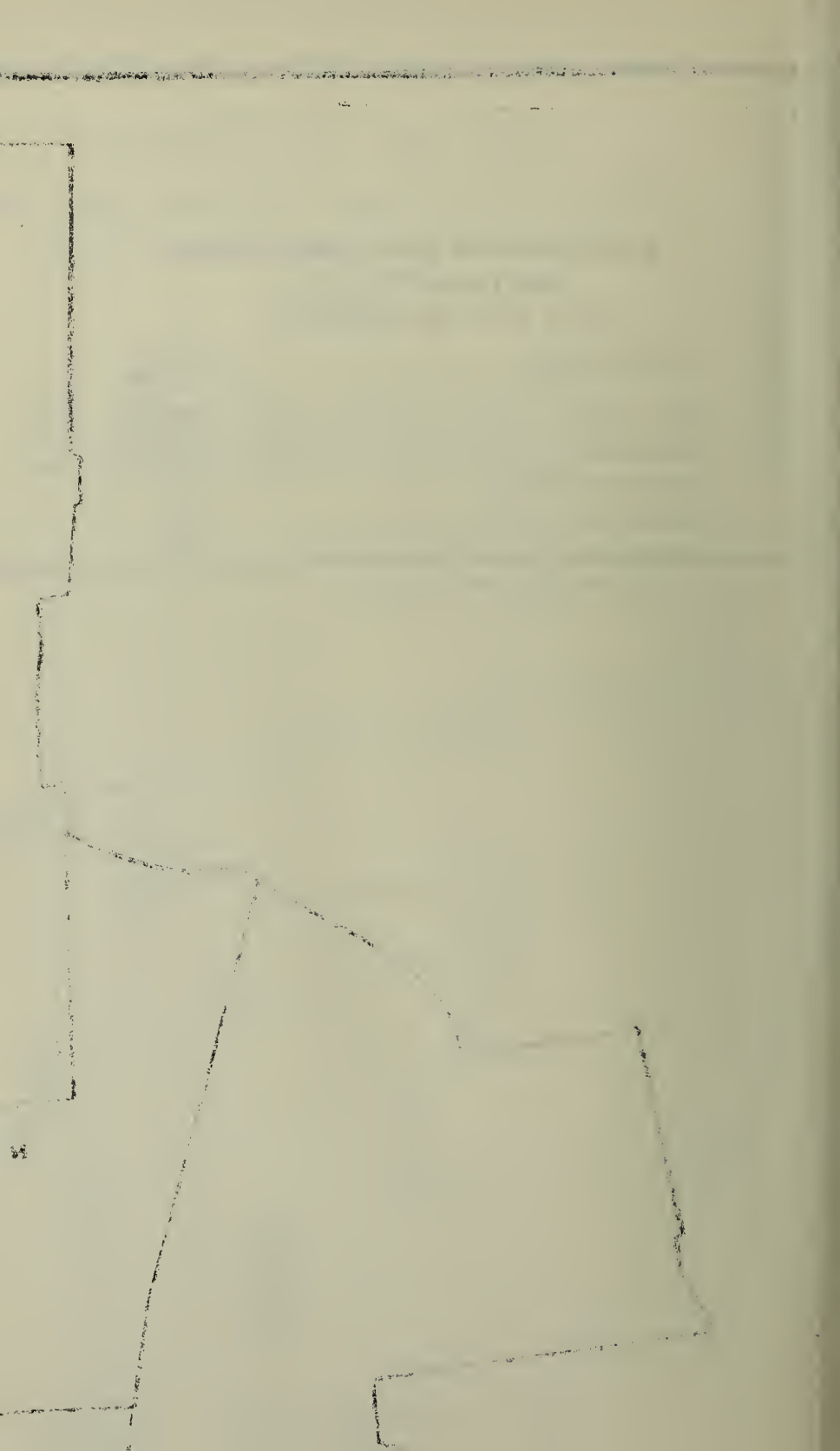
Type of School				Percentage		
				Negative	Positive	Positive
Secondary Modern	....	....	1,289	307	19·24
Primary	....	....	252	53	17·38
Grammar	....	....	377	108	22·27
Secondary Technical	....	....	84	34	28·81
Voluntary	....	....	103	26	20·16
Special	....	....	26	5	16·13
				<hr/>	<hr/>	<hr/>
				2,131	533	20·01

TABLE E

B.C.G. SCHEME—1958

Ward	Total	Negative	Positive	Percentage Positive
North Newington	119	107	12	10·08
South Newington	110	98	12	10·91
Coltman	105	94	11	10·48
St. Andrews	89	71	18	20·22
Pickering	339	292	47	13·86
Albert	62	52	10	16·13
Botanic	65	54	11	16·92
Park	58	44	14	24·14
Newland	111	92	19	17·12
University	290	229	61	21·03
Myton	11	9	2	18·18
Paragon	13	11	2	15·38
West Central	65	48	17	26·15
East Central	53	39	14	26·42
Beverley	105	73	32	30·48
Alexandra	169	130	39	23·08
Drypool	42	30	12	28·57
Southcoates	96	73	23	23·96
Stoneferry	136	101	35	25·74
Marfleet	148	116	32	21·62
Sutton	381	298	83	21·78
Non-resident	97	70	27	27·84
	<hr/> 2,664	<hr/> 2,131	<hr/> 533	<hr/> 20·01





SCHOOL HEALTH SERVICE

REPORT OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1958

KINGSTON UPON HULL EDUCATION COMMITTEE

Chairman—

Alderman D. C. LISTER, M.A., J.P.

Deputy-Chairman—

Councillor J. G. E. TESKEY-KING.

Schools Services Sub-Committee.

Chairman—

Alderman F. HOLMES, O.B.E.

Deputy-Chairman—

Councillor J. G. E. TESKEY-KING.

Alderman J. LAWSON.

Alderman D. C. LISTER, M.A., J.P.

Councillor (Mrs.) E. BEECROFT.

Councillor (Mrs.) C. ELLIS.

Councillor W. HARGREAVES.

Councillor E. KIRKWOOD.

Councillor F. W. MOORE

Councillor J. W. SMITH.

Councillor H. WOODFORD

Mr. T. F. BEECROFT.

Mr. F. O. DUNN.

Mr. P. FROW, B.Sc., A.R.I.C.

Rev. R. HAW, D.S.C., M.A., B.C.L.

Mrs. C. L. OATES.

Mrs. G. THOMAS

Mrs. L. WALKER.

Chief Education Officer—

S. W. HOBSON, M.A.

STAFF OF SCHOOL HEALTH SERVICE

at 31st December, 1958

Principal School Medical Officer
ALEXANDER HUTCHISON

Deputy Principal School Medical Officer
ANGUS MCGREGOR, M.A., M.D., B.Chir., D.P.H.

Senior Medical Officer (School Health Service)
ALASTAIR M. R. CANN, M.D., M.R.C.S., L.R.C.P., D.C.H.

School Medical Officers

(Combined duties in School Health, Maternity and Child Welfare, and Port Health Services)

JEAN M. BARROWMAN, M.B., Ch.B.
MARGARET M. BELL, M.B., B.Ch., D.P.H., D.C.H.
CHRISTINE N. R. CAMPBELL, M.B., Ch.B.
ELIZA J. CARSON, M.B., B.Ch., B.A.O.
ALLEN V. HOLLINGWORTH, M.B., Ch.B., M.R.C.S., L.R.C.P.
SAMUEL KLINGER, M.D.
FRANCES W. MOYES, M.B., Ch.B.
BRYAN REFFOLD, M.B., B.S.

ELIZABETH WALES, M.B., B.S., L.M.S.S.A.
GEOFFREY R. WALKER, M.B., Ch.B., D.P.H., D.T.M.
KATHLEEN A. WILSON, M.B., Ch.B., B.A.O., L.M., D.P.H.

Specialist Medical Officers (Services provided by Regional Hospital Board)

Cardiologist : D. C. MUIR, M.D., F.R.C.P.
Ophthalmologists : K. DEAN FOGGITT, M.B., Ch.B., D.O., D.O.M.S.
A. POLI, M.B., Ch.B.
Orthopædists : C. R. BERKIN, M.B., F.R.C.S.
R. C. TATHAM, F.R.C.S.
Otologists : E. M. DEARN, M.B., Ch.B., D.L.O.
J. S. MARTIN, M.B., B.Ch., B.A.O., F.R.C.S., D.L.O.
R. R. SIMPSON, M.B., Ch.B., F.R.C.S.
Paediatrician : R. J. PUGH, M.R.C.P., D.C.H.
Psychiatrist : J. MACKAY, M.D., D.P.M.

Principal School Dental Officer
JOHN C. CARR, L.D.S., R.C.S.(Eng.).

Dental Officers
G. PEARSON, L.D.S., R.C.S.(Eng.).
Five Part-time Dental Officers

Dental Hygienist
Mrs. M. TODD

Educational Psychologists
G. F. REED, M.A., A.B.Ps.S.
A. C. SMITH, M.A.

Social Workers (Child Guidance)
Mrs. M. AITKEN, S.R.N.
Mrs. E. D. STRINGER, R.M.N.

Speech Therapists
Two Vacancies

Chiropodists
Two Part-time

Nursing Staff
Superintendent : Mrs. E. T. BASS, S.R.N., S.C.M., H.V.
Nurses : Twenty

Physiotherapists
Superintendent : Miss M. R. K. JARRATT, M.C.S.P.
Three Part-time Physiotherapists

Dental Attendants : Four
Cleanliness Visitors : Two

Clerical Staff
Senior Clerk : R. LAZENBY, D.P.A.
Clerks : Seventeen

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*To the Chairman and Members
of the Education Committee.*

Mr. CHAIRMAN, LADIES, AND GENTLEMEN,

I have the honour to submit the Report upon the health of the school children and the work of the School Health Service in the City and County of Kingston upon Hull for the year ended 31st December, 1958.

The work done by the Department showed an increase during the year despite a shortage of staff in certain directions. Both Speech Therapists resigned during the year and it was not possible to replace them, so that for the second half of the year no speech therapy was carried out.

No more full-time Physiotherapists became available but during the year two additions were made to the part-time staff, one of whom was a transfer from the Maternity and Child Welfare Service of the Health Department.

Despite repeated advertisements it was not possible to engage sufficient staff to bring the number of School Dental Officers up to establishment. Mr. Carr, the Principal School Dental Officer, has continued to give dental care and treatment to the boys of Aldwark Manor Residential School in a surgery in York loaned by the York Education Committee.

The provision for handicapped pupils was kept under review by the Education Committee and during the year plans were prepared for a new school for physically handicapped pupils.

Proposals for a school for educationally subnormal children were submitted to the Ministry but a decision on this has been deferred in the meantime.

A new Home and Clinic Teacher for pre-school deaf children commenced work in January, 1958. By arrangement with the Education Committee this teacher spent three months in London observing the methods of the Audiology Unit of the Royal National Throat, Nose and Ear Hospital in London. This facility was arranged through the kind permission of the Medical Director, Miss Edith Whetnall. The experience the teacher has gained will undoubtedly be of great value to her in her work in Hull.

In an Appendix to the Report, Dr. Cann, the Senior Medical Officer for the School Health Service, has written a short account of the education of deaf children in Kingston upon Hull which is most interesting and instructive.

From this account it will be seen that provision for the education and treatment of deaf children has been made for over 100 years in this area and the history of this service makes fascinating reading.

There were two outbreaks of infectious disease at Aldwark Manor Residential School, the first being a small outbreak of chicken pox, the second a large outbreak of Sonne dysentery which eventually involved nearly all the pupils. The staff of the school are to be commended for the excellent work they did during this outbreak. Their efforts helped to bring the outbreak under control in the minimum period of time.

It is with regret that I have to record the death during the year of Dr. J. W. Brown who for many years worked in the heart clinic which was run by the School Health Service and which had been started by Dr. D. C. Muir of this City. It was at this clinic that Dr. Brown started the close study of congenital heart disease, and the original papers on that subject by Drs. Brown and Muir were published on the work done at the clinic. Dr. Brown's book on Congenital Heart Disease is one of the most important books written as a clinical study and it earned him world wide renown. The Kingston upon Hull heart clinic run by the School Health Service was a pioneer of its kind in Great Britain, if not in the world, and the work done by Dr. Brown and his colleague, Dr. Muir, and which still continues to be carried out, has benefitted many of the citizens of Kingston upon Hull. Dr. Brown's death was a great loss to British cardiology and to the School Health Service.

Dr. G. P. McCarthy, Medical Officer of Health and Principal School Medical Officer for the City of Cork, visited our City during the third week in October and during his stay studied all aspects of the work of our School Health Services and of the special schools.

During the year visits to various clinics and special schools were made by sister tutors, student health visitors, students from the Training College, candidates for the Diploma in Child Health and other interested persons, and the Department continued to co-operate in the national survey of the Health and Development of children.

The staff of the Department have continued to work together in a most satisfactory manner and co-operation between the School Health Service and the Health Department improved still further with everyone trying most enthusiastically to ensure that all the children received the care to which they are entitled.

The encouraging interest taken by the Chairman and Members of the Education Committee and the Schools Services Sub-Committee continued throughout the year and as always Mr. Hobson, the Chief Education Officer, has given most valuable help and has been most ready to discuss any problems that arise. I have been able to continue to rely on Dr. Cann's expert knowledge and ability.

I have the honour to be,

Your obedient Servant,

ALEXANDER HUTCHISON,

Principal School Medical Officer.

Health Department,
Guildhall, Kingston upon Hull.
March, 1959.

CITY OF KINGSTON UPON HULL

GENERAL STATISTICAL INFORMATION

	1958	1957
Population (estimated)	301,100	300,500
Maintained Primary and Secondary Schools—		
Number of Schools	101*	93
Number of Departments	177*	171
Number on Rolls	55,370*	54,709
Maintained Special Schools—(included in totals above)—		
Number of Schools	6*	6
Number on Rolls	583*	604
Maintained Nursery Schools—(included in totals above)		
Number of Schools	2*	2
Number on Rolls	144*	153
* As at 18th January, 1958		
Cost of School Health Service—	1957-58	1956-57
Total Cost	£54,753	£59,120
Government Grant	£32,792	£37,246
Cost to Rates	£21,961	£21,874
Cost in terms of a Penny Rate	1.72d.	1.65d.

SUMMARY OF WORK

	1958	1957
A. Medical Officers at Schools, etc.—		
Periodic inspections at Primary, Secondary, Nursery and Special Schools	14,988	13,267
Special inspections at Primary, Secondary, Nursery and Special Schools	192	211
Re-inspections at Primary, Secondary, Nursery and Special Schools	2,265	2,387
B. Medical Officers and Specialists at Clinics—		
Inspections at Clinics	8,456	8,701
Re-inspections at Clinics	14,474	13,748
Inspections under Employment of Children Bye-laws	916	1,066
Miscellaneous	500	447
C. Dental Officers—		
Inspections at Schools	3,587	2,307
Inspections at Clinics	4,438	4,478
Attendances for treatment	11,690	11,332
D. Nurses, Dental Hygienist and Medical Auxiliaries—		
Visits to Schools	5,214	5,016
Examinations (including cleanliness inspections) in Schools	228,915	213,626
Visits to homes etc.	19,740	20,078
Treatments of minor ailments in Clinics	77,623	69,497
Treatments of minor ailments at Special Schools	11,135	11,298
Treatments of orthopædic defects in Clinics	396	493
Treatments of orthopædic defects at Special Schools	2,190	2,154
Inspections of Speech Defects in Clinics	367	591
Treatments of Speech Defects in Clinics	1,507	2,713
Treatments of Speech Defects at Special Schools	172	353
Treatments by Chiropodists	3,682	3,192
Treatments by Dental Hygienist	2,217	1,740
E. School Clinics—		
Grand total of inspections and treatments as detailed above	126,271	117,998

I. STAFF

Details of the staff employed in the School Health Service on the 31st December, 1958, are to be found on page 4.

The number of sessions devoted by medical officers to work in the School Health Service was equivalent to the service of approximately 5.0 full time school medical officers throughout the year.

The staff of full-time and part-time dental officers increased during the year from the equivalent in full-time officers of about 2.6 at the beginning of the year to about 3.6 at the end of the year, with an average for the year of about 3.0. A full-time dental officer was appointed on 1st September, 1958

The following staff commenced duty :

<i>Name</i>	<i>Designation</i>	<i>Date</i>
Miss J. Archer	Teacher of the Deaf	7th January
Mrs. M. Taylor	Dental Officer*	31st January
Mrs. A. Hathaway	School Nurse	24th February
Dr. E. Wales	Medical Officer	1st June
Mr. G. Rooms	Dental Officer*	2nd June
Mrs. P. Kemp	Dental Attendant	22nd August
Mr. G. Pearson	Dental Officer	1st September
Dr. A. McGregor	Deputy Principal School Medical Officer	1st September
Mrs. R. M. Nixon	Dental Officer*	9th September
Mrs. L. Spencer	Physiotherapist*	29th October
Mrs. D. Young	School Nurse	1st November
Miss K. E. Tennison	Physiotherapist*	12th November

The following staff ceased duty :

<i>Name</i>	<i>Designation</i>	<i>Date</i>
Dr. J. Tong	Medical Officer	30th March
Miss E. A. Tarbotton	Speech Therapist	30th June
Mr. R. G. Cowley	Dental Officer*	14th July
Dr. J. G. Cairns	Deputy Principal School Medical Officer	18th August
Mr. T. R. Francis	Speech Therapist	31st August
Miss H. Robinson	Dental Attendant	5th September
Mr. G. Rooms	Dental Officer*	29th October

* Part-time

Courses

The following members of the staff attended courses or conferences during the year :

Dr. A. M. R. Cann : International Congress on Educational Treatment of Deafness, Manchester.
Biennial Conference of Special Schools Association, Liverpool.
Conference on Factors in the Assessment and Education of Cerebral Palsied Children, Bristol.

Elementary Short Course on Nuclear Energy, Kingston upon Hull.

Miss J. Archer : International Congress on Educational Treatment of Deafness, Manchester.
Course of training at Audiology Unit, Royal National Throat, Nose and Ear Hospital, London.

Mrs. E. T. Bass : Course on theory and practice of screening tests of hearing of babies and young children, Manchester.

II. CO-ORDINATION

The scheme providing for the interavailability of clinic services between various sections of the Corporation's Health Services continued throughout the year. A summary of the work carried out under this scheme is given in the following two tables and references to the interavailability scheme appear in various tables in the report.

Very satisfactory co-operation exists with the hospitals. Reports and information are exchanged when necessary. All recommendations for admission to hospital made by consultants at school clinics are notified to the respective Admission Officers who deal with them without requiring the children to be seen unnecessarily at the hospital out-patient clinics.

On 10th June the Senior Medical Officer (School Health Service) attended a meeting of the Hull and District Head Teachers, National Union of Teachers, and answered questions about the procedure and methods used in the ascertainment of educationally subnormal pupils. It was generally agreed that the exchange of information would prove helpful.

Services provided by the School Health Service

SERVICE	HEALTH COMMITTEE						Children's Committee		Totals	
	Children under 5 years		Nursing and Expectant Mothers		Ineducable Children					
	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.	New Cases	Attend.
Minor Ailments Inspections	242	358	—	—	2	2	—	—	244	360
Minor Ailments Treatment	509	1757	—	—	2	5	—	—	511	1762
*Dental Treatment including Dental Hygiene	230	317	313	805	1	1	34	34	578	1157
Orthopaedic Clinic Inspections	7	13	—	—	—	—	—	—	7	13
Orthopaedic Clinic Treatments	1	5	—	—	—	—	—	—	1	5
Ophthalmic Clinic	76	260	—	—	—	2	—	—	76	262
Aural Clinic	34	44	—	—	1	2	—	—	35	46
Rheumatism and Heart Clinic	1	1	—	—	—	—	—	—	1	1
Chiropody Clinics	5	5	—	—	—	1	—	—	5	6
Speech Therapy Clinic Treatments	—	—	—	—	—	4	—	—	—	4
Auditory Training	12	330	—	—	—	—	—	—	12	330
Cerebral Palsy Clinic Inspections	9	16	—	—	—	5	—	—	9	21
Cerebral Palsy Treatment	2	261	—	—	—	67	—	—	2	328
Child Guidance Clinic	2	12	—	—	—	15	—	—	2	27

* The figures for "New Cases" for dental work represent the total numbers of individuals treated during the year whether new cases or not.

Services provided for the School Health Service

Service	Cases	Attendances
Artificial Light Treatment :—		
(a) At West Hull Clinic (M. & C.W.)	58	328
(b) At East Hull Combined Clinic	115	1121
(c) At North Hull Combined Clinic	73	959
Orthopaedic Clinic (East Hull)—Treatments	12	332
X-Ray Examinations	123	123

III. MEDICAL INSPECTION

Figures relating to inspection at maintained schools are to be found in Parts I and II (Tables A) of the Ministry of Education Statistical Tables at the end of this report.

In addition, 100 individual inspections were carried out at Hymers College (direct grant secondary school).

Approximately 1721 more inspections were conducted in schools in 1958 than in 1957.

IV. FINDINGS AT MEDICAL INSPECTIONS

Statistics relating to various defects are printed in Statistical Tables Part I, Table B and Part II Tables A and B at the end of this Report. Most of the "Special Inspections" were carried out at the clinics.

Uncleanliness

The Authority's scheme for the examination and cleansing of infested pupils embodies the requirements of Section 54 of the Education Act, 1944. Statistics are printed in Part I (Table D) at the end of this Report.

The number of individual children found in an unclean condition in 1958 was 3450 as compared with 4703 in 1957 and 5,815 in 1956; the percentage was 6.2 in 1958, compared with 8.7 in 1957 and 10.7 in 1956.

Cleanliness inspections in schools—Total 194,821.

Findings	Individual Children	Percentage of School Roll
Nits present, but no vermin seen	3097	5.6
Vermin present	284	0.5
Dirty but no nits or vermin	69	0.1
Total	3450	6.2

During this year, as has been the case since 1953, it has not been found necessary to take any parent to Court in order to enforce cleanliness. In every case the school nurse has succeeded ultimately in securing cleanliness by persuasive means. It must not be forgotten that this involves a great deal of trouble and tact on the part of a nurse and considerable praise is due to our staff for having succeeded in this way.

Tuberculosis

No children attending the Chest Clinics during the year were referred by the School Health Service.

A considerable number of children were referred for chest X-ray at the East Hull Clinic, but, being found to be free from tuberculosis, they were further dealt with at the Pædiatric Clinic.

Visual Defects

In addition to the medical officers' inspections, the school nurses made 69 visits to schools during the year to carry out vision surveys of pupils aged 7 years. 4,550 pupils were inspected, of whom 385 were referred direct to the ophthalmic consultant. 312 of these pupils were inspected by the consultant and glasses were prescribed in 171 cases.

Foot Defects

The chiropodists paid 22 visits to schools and inspected 3,898 pupils of whom 430 were referred for treatment by the chiropodists at the clinics.

Tonsillectomy

In connection with an enquiry into the frequency with which tonsils are removed in the areas of various Local Education Authorities, School Medical Officers made special note at all routine inspections of whether the tonsils were still present or not.

The following table is of interest :

KINGSTON UPON HULL C.B.
Frequency of Tonsillectomy 1958

Year of Birth	No. of children Inspected		No. found to have had Tonsillectomy		Percentage	
	Boys	Girls	Boys	Girls	Boys	Girls
1954 and later	96	84	7	6	7.29%	7.14%
1953	928	879	102	78	10.99%	8.87%
1952	1477	1462	168	138	11.37%	9.44%
1951	33	40	7	7	21.21%	17.5%
1950	13	17	5	3	38.46%	17.65%
1949	10	4	1	—	10%	—
1948	962	933	288	288	29.94%	30.87%
1947	1958	2071	610	697	31.15%	33.65%
1946	32	34	7	10	21.87%	29.41%
1945	5	2	—	1	—	50%
1944	181	219	75	78	41.44%	35.65%
1943 and earlier	1784	1664	657	590	36.83%	35.46%
TOTAL	7479	7409	1927	1896	25.76%	25.59%

V.—HOME VISITS

The number of visits paid to homes in connection with preparation for medical inspection, follow-up of children with defects, the cleanliness scheme, problem cases, etc., was 19,740.

VI.—ARRANGEMENTS FOR TREATMENT

Summaries of the inspection and treatment work done in the school clinics are printed in the tables on pages 17 and 18.

In addition treatment continued to be carried out at the following day special schools :

Park Avenue (P.H.) School : minor ailments, three sessions ; physiotherapy, eleven sessions ; *speech therapy, four sessions per week.

Northumberland Avenue (E.S.N.) School : minor ailments, three sessions per week.

Cottingham Road (Open Air) School : minor ailments, ten sessions.

Ringworm : An arrangement exists with Hull Royal Infirmary for prompt examination and treatment in all cases.

* Speech Therapy not available after July.

Location and Times of School Clinics

Inspection Clinics—	74 Beverley Road	Monday, Wednesday and Thursday, 1.45 p.m. to 5 p.m.
	114 Coltman Street	Monday, Wednesday and Thursday, 1.45 p.m. to 5 p.m.
	Morrill Street	Tuesday and Friday, 1.45 p.m. to 5 p.m.
	Ellerburn Avenue	Tuesday and Friday, 1.45 p.m. to 5 p.m.
	Ainthorpe Grove School	Alternate Wednesdays, 1.45 p.m. to 4 p.m.
	Hopewell Road School	Alternate Wednesdays, 1.45 p.m. to 4 p.m.
Minor Ailments Treatment Clinics—		
	74 Beverley Road	Monday to Friday, 9 a.m. to 12 noon and 1.45 p.m. to 5 p.m. Saturday, 9 a.m. to 12 noon.
	114 Coltman Street	Do. do. do.
	Morrill Street	Do. do. do.
	Ellerburn Avenue	Monday to Friday, 1.45 p.m. to 5 p.m. Saturday, 9 a.m. to 12 noon
	Ainthorpe Grove School	Monday to Friday, 1.45 p.m. to 4 p.m.
	Hopewell Road School	Do. do.

Dental Clinics—	74 Beverley Road 114 Coltman Street Morrill Street Ellerburn Avenue	} Monday to Saturday at various centres, as arranged
Ophthalmic Clinics—	74 Beverley Road 114 Coltman Street Morrill Street Ellerburn Avenue	} Monday and Thursday (9-15 a.m. to 12 noon, and 2 p.m. to 5 p.m.). Tuesday, Wednesday and Friday (2 p.m. to 5 p.m.), and Saturday (9-15 a.m. to 12 noon) at various centres, as arranged.
Aural Clinics—	74 Beverley Road 114 Coltman Street Morrill Street Ellerburn Avenue	As arranged Tuesday, 2-30 p.m. to 4 p.m. as arranged Tuesday, 10 a.m. to 12 noon, as arranged Tuesday, 10 a.m. to 12 noon, as arranged
Orthopædic Clinics—	74 Beverley Road	Wednesday and Thursday, 9-0 a.m. to 12 noon. Inspections by Orthopædic Surgeons, as arranged.
Cerebral Palsy Clinic—	Park Avenue Special School	Inspections by Pædiatrician, as arranged
Rheumatism and Heart Clinics—	74 Beverley Road and Morrill Street	Thursday, 2 p.m. to 5 p.m., as arranged
Pædiatric Clinics—	74 Beverley Road and Morrill Street	Monday, 9.45 a.m. to 10.45 a.m. as arranged Friday, 2 p.m. to 4 p.m., as arranged
Child Guidance Clinic—	Kingston College, 48a Beverley Road	Monday to Friday, 2 p.m. to 5 p.m. Thursday, 9.0 a.m. to 12.30 p.m.
*Speech Therapy Clinics—	74 Beverley Road Kingston College, 48a Beverley Road	Monday, Tuesday, Wednesday, Friday and Saturday, 9 a.m. to 12 noon. Monday, Tuesday, Wednesday and Friday, 1.30 p.m. to 4.30 p.m. Monday, Tuesday and Wednesday, 1.30 p.m. to 4-30 p.m. ; Thursday, 9 a.m. to 12 noon.
Chiropody Clinics—	74 Beverley Road Morrill Street 114 Coltman Street Ellerburn Avenue	Thursday and Friday, 9 a.m. to 12 noon Wednesday and Thursday, 9 a.m. to 12 noon Monday and Wednesday, 9 a.m. to 12 noon Tuesday, 9 a.m. to 12 noon
Auditory Training—	74 Beverley Road	By appointment

* Suspended due to resignation of Staff.

WORK DONE IN SCHOOL CLINICS

WORK UNDERTAKEN	CENTRAL CLINIC		WEST HULL CLINIC		EAST HULL CLINIC		NORTH HULL CLINIC		AINTHOPE GROVE CLINIC		HOPEWELL ROAD CLINIC		KINGSTON COLLEGE CLINIC		SUMMARY					
	New Cases	Total Attend.	New Cases	Total Attend.	New Cases	Total Attend.	New Cases	Total Attend.	New Cases	Total Attend.	New Cases	Total Attend.	New Cases	Total Attend.	School Cases		Non-School Cases		All Cases	Total Attend.
															New Cases	Total Attend.	New Cases	Total Attend.		
Inspection Work :— 1. Minor Ailments and General 2. Orthopaedic 3. Ophthalmic 4. Aural 5. Rheumatism and Heart 6. Paediatric 7. Educational Subnormality 8. Child Guidance 9. Speech Therapy 10. Employment Cases 11. Miscellaneous	1748	2744	2804	3712	1505	2152	1428	1936	322	396	352	427	—	—	7915	11027	244	360	8159	11387
	24	76	—	—	—	—	—	—	—	—	—	—	—	—	17	63	7	13	24	76
	339	1503	398	1629	460	1780	56	308	—	—	—	—	—	—	1177	4958	76	262	1253	5220
	321	520	203	237	464	480	139	142	—	—	—	—	—	—	1092	1333	35	46	1127	1379
	62	69	—	—	—	—	—	—	—	—	—	—	—	—	61	68	1	1	62	69
	138	346	—	—	59	135	—	—	—	—	—	—	—	—	197	481	—	—	197	481
	100	186	41	82	15	26	8	19	—	—	—	—	—	—	164	313	—	—	164	313
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	118	118	2	2	120	120
	65	278	—	—	—	—	—	—	—	—	—	—	—	18	83	367	—	83	367	
	245	329	231	231	165	165	133	133	51	51	91	91	—	—	916	916	—	—	916	916
	319	—	89	91	68	68	11	11	—	—	1	1	—	—	36	36	452	464	488	500
Treatment Work :— 1. Minor Ailments (including aural) 2. *Dental including Dental Hygiene 3. Orthopaedic 4. Child Guidance 5. Speech Therapy 6. Chiropody	2351	16045	4006	23948	1982	10208	1540	9727	2219	5840	3402	11860	—	—	14989	75866	511	1762	15500	77628
2053	5888	1684	2844	1583	3045	955	2111	—	—	—	—	—	—	5730	12764	545	1124	6275	13888	
35	396	—	—	—	—	—	—	—	—	—	—	—	—	34	391	1	5	35	396	
—	—	—	—	—	—	—	—	—	—	—	—	—	120	118	3454	2	27	120	3481	
25	786	—	—	—	—	—	—	—	—	—	—	—	21	46	1503	4	4	46	1507	
655	1211	747	1251	—	214	779	170	441	—	—	—	—	—	1781	3676	5	6	1786	3682	
Cerebral Palsy Out-Patient Clinic at Park Avenue (P.H.) School :															5	40	9	21	14	61
															—	—	2	328	2	328

School Clinics, 1955-58

Number of Cases (including Non-School Cases)

Work Undertaken	1955	1956	1957	1958
Minor Ailments—Inspection Clinics (new cases) :				
1. Minor Ailments treated	14762	14090	13633	15500
2. Defects inspected	10372	9073	8403	8159
3. Employment Cases	964	1003	1066	916
4. Miscellaneous Inspections	423	451	444	488
Refraction Clinics (new cases)	1921	1432	1299	1253
Dental Clinics—Treatment only (including Dental Hygienist)	7230	6794	5794	6275
Orthopaedic Clinics (new cases)	29	31	12	24
Aural Clinic Inspections (new cases)	1322	1059	791	1127
Rheumatism and Heart Clinics (new cases)	71	42	69	62
Paediatric Clinics (new cases)	235	216	220	197
Formal Examinations for Educational Subnormality	159	179	152	164
Child Guidance (new cases)	103	129	127	120
Speech Therapy :				
1. Cases inspected (new cases)	116	139	179	83
2. Cases treated (new cases)	53	55	58	46
Chiropody (new cases)	1956	1882	1723	1786
Cerebral Palsy (new cases)	17	2	3	14

Notes on various clinic activities are given below :

(a) Minor Ailments

There was an increase in the total number of cases treated during the year compared with 1957. The number of cases of ringworm of the scalp was 3 ; The number of cases of ringworm of the body decreased from 18 in 1957 to 17 in 1958. 130 cases of scabies, which is 18 more than in the previous year, were treated during the year. The number of cases of impetigo decreased from 717 in 1957, to 660 in 1958.

(b) Visual Defects

A summary of the work done at the Ophthalmic Clinics is given in the table below.

Ophthalmic Clinics

	New Cases	Attendances	Glasses Prescribed
Maintained School Pupils	1176	4946	3078
Hymers College Pupils	1	12	11
Children under 5 years	76	260	74
Occupation Centre children	—	2	—
Totals	1253	5220	3163

The table below refers to conditions found at the ophthalmic clinic for the first time during 1958. A few patients had more than one condition.

Summary of Conditions Found

Condition	Number of Examples
Small refractive error—glasses not advised	258
Small refractive error—glasses advised	187
Moderately severe refractive error (excluding Myopia)	146
Severe refractive errors (excluding Myopia)	—
Myopia, over 1D	195
Myopia (severe)	7
Squint	116
Conjunctivitis	57
Blepharitis	8
Keratitis and Ulcer	3
Nystagmus	4
Optic Atrophy	3
Uveitis	1
Cysts, Styes, etc.	2
Injuries and Foreign Bodies	8
Miscellaneous or Unclassified	11
Epicanthus	27
Total	1033

The Ophthalmic Surgeon carried out operations on 62 school children at hospitals during the year. Most of these were for the correction of squint. Artificial eyes were prescribed in three cases. The arrangements of the Hospital Eye Service for the dispensing, replacement and repair of glasses were continued throughout the year. The dispensing opticians of the No. 4 Hull (A) Group Hospital Management Committee continued to attend at the school clinics when the Ophthalmologist was present in order to make measurements and fit glasses for children whose parents had chosen to have glasses supplied through the Hospital Eye Service.

135 school children and 18 pre-school children were referred to the Orthoptic Clinic held by No. 4 Hull (A) Group Hospital Management Committee.

(c) Ear, Nose and Throat Defects

A summary of the defects found in school children investigated at the Aural Clinics is given in the table following

Aural Clinics

Disease	New Cases	Attendances	Operation Required
Otitis Media	39	54	8
Congenital Deafness	2	40	1
Other Ear Defects	135	293	27
Chronic Tonsillitis and Adenoids	511	558	539
Chronic Tonsillitis only	42	46	18
Adenoids only	8	8	6
Other Nose and Throat Defects	356	371	251
Total	1093	1370*	850

* Includes 34 pupils seen by the Otologist at the Sutton (Deaf) School.

Operations were carried out at various hospitals, the hospital admission officers concerned having been informed direct by the School Health Service of the surgeon's recommendations.

During the year individual hearing aids were provided through the National Health Service for 2 pupils attending the School for the Deaf, 1 pupil attending the Open Air School, 1 pupil attending the School for the Physically Handicapped, 8 partially deaf pupils attending ordinary schools, and 4 pre-school children.

(d) Orthopædic and Postural Defects

Summaries of the work carried out at the Orthopædic Clinics are given in the tables below. No whole-time physiotherapist was available at the Central and North Hull School Clinics, the work being carried out as far as practicable by a physiotherapist employed primarily at the School for Physically Handicapped until November. From November an additional part-time physiotherapist was engaged to work three sessions a week at the Central Clinic only. Unfortunately it still remains that only the more serious cases may have regular physiotherapy.

Central Orthopædic Clinic.

(A) Inspections and Re-inspections by Orthopaedic Surgeons

Type of Case	School Cases		M. & C.W. Cases	
	New Cases	Attend.	New Cases	Attend.
Spinal Curvature	4	11	—	—
Poliomyelitis	—	11	—	—
Cerebral Palsy—				
(a) Spastic	—	11	—	—
(b) Athetoid	—	—	—	—
(c) Ataxic	—	—	—	—
Osteochondritis	—	1	—	—
Fractures and Injuries	—	1	—	—
Rickets	—	—	—	—
Tuberculosis (bone)	—	1	—	—
Birth paralysis	—	—	—	—
Flat Feet	4	6	3	6
Valgus ankles	1	1	1	1
Other forms	8	20	3	6
	17	63	7	13

Total new cases—24. Total attendances for inspection—76.

(B) Treatment

Form of Treatment					Attendances
Massage	....	....	....	....	1
Electrical	....	....	....	....	—
Remedial Exercises	....	....	....	....	390
Other	....	....	....	....	—
Total	....	....	....	....	391

A part-time physiotherapist appointed by the Health Committee was employed at the East Hull Orthopædic Clinic, which is situated in the Maternity and Child Welfare Section of the clinic premises, up to October, when she was transferred to the School Health Service.

East Hull Orthopædic Clinic (School Cases only)*Treatment*

Form of Treatment										Attendances
Massage	....	....	....	....	....	....	....	....	....	6
Remedial Exercises	....	....	....	....	....	....	....	....	....	326
Other	....	....	....	....	....	....	....	....	....	—
Total	....	....	....	....	....	....	....	....	....	332

Orthopædic appliances prescribed by the surgeons at the clinics were supplied by the Regional Hospital Board.

(e) Heart Disease and Rheumatism

This Clinic continued its work in conjunction with the Cardiac Unit established by the Regional Hospital Board at the Kingston General Hospital. Details of the work at the clinic are given below. The work at the clinic represents that of a provisional sorting centre, so that the attendances there are few. The supervision of cases found to have organic heart disease is carried out at the hospital at the wish of the Cardiologist.

Condition	School Cases		Children under 5 years		Totals	
	Cases	Attend.	Cases	Attend.	Cases	Attend.
1. Rheumatic Pains or Arthritis—						
(a) with heart affection	4	4	—	—	4	4
(b) without heart affection	—	1	1	1	1	2
2. Rheumatic Chorea—						
(a) with heart affection	1	1	—	—	1	1
(b) without heart affection	1	1	—	—	1	1
3. Rheumatic Carditis without (1) or (2) above	2	2	—	—	2	2
4. Congenital Heart Disease	4	8	—	—	4	8
5. Functional Heart Disorder	28	30	—	—	28	30
6. No Rheumatism or Heart Disease or Disorder	21	21	—	—	21	21
Totals	61	68	1	1	62	69

(f) Treatment by Artificial Light

This treatment is given at Maternity and Child Welfare Clinics ; 246 pupils were treated during the year.

(g) Pædiatric Clinic

The number of new cases seen during the year was 199 and the total attendances were 481.

The table printed below shows the diseases or defects apparent in the cases attending.

Defects	New Cases	Total Attendances
Nutritional Disorders	—	3
Skin	4	5
Eyes—(a) Vision	—	—
(b) Squint	—	2
(c) Other	—	3
Ears	2	58
Nose or Throat	21	—
Speech	—	5
Lymphatic Glands	2	5
Endocrine disorder	20	41
Heart	1	4
Blood Diseases	2	4
Lungs—		
(a) Asthma	5	25
Asthma and Rheumatism	—	—
Asthma and Other Allergic Conditions	6	14
(b) Bronchitis	8	38
(c) T.B.	1	3
(d) Other	1	10
Renal	—	—
Tuberculosis, non-pulmonary	—	—
Abdomen	4	6
Rheumatism	1	5
Developmental—		
(a) Hernia	1	1
(b) Other	16	21
Orthopaedic—		
(a) Posture	—	—
(b) Other	—	2
Nervous System—		
(a) Epilepsy	10	25
(b) Other	1	12
Psychological—		
(a) Development	1	1
(b) Stability	25	87
Genital Organs	—	1
No Organic Disease Detected	67	105
Totals	199	481

(h) **Dental Treatment**

Report by MR. J. C. CARR, *Principal School Dental Officer*

During the year 1958 the School Dental Service has been conducted in the same manner as in the previous year. The most encouraging event has been the advent of Mr. Pearson, a recently qualified dental surgeon and a native of Kingston upon Hull, who has joined the permanent staff and thereby doubled the number of full-time dental officers. Mr. Pearson is a most valuable acquisition and I welcome him wholeheartedly.

We are being helped by six part-time dental officers who, together with Mr. Pearson and myself, constitute an effective strength of almost five, a slight improvement upon last year.

Whilst in no way belittling the valuable help which we continue to receive from part-time dental officers, it must be emphasised that the permanent officer is the real foundation of any dental service. He must become an individual bearing a name, which becomes familiar to both parent and child. However good the scheme or however widespread, dentistry, to succeed, must always maintain an essentially personal relationship between patient and dentist. It is my experience that the patient is not attracted primarily by the service but by the dentist ; and unless there is this prospect of familiarity with an individual, the service cannot succeed. This is particularly important where children are concerned ; and I believe that it is the absence of this factor which is largely responsible for the poor acceptance rate among children who do not take advantage of routine treatment from any source whatsoever. For this reason alone I welcome Mr. Pearson as, indeed, I should any full-time dental officer who might join us.

Mrs. Todd, our dental hygienist, is still an enthusiastic and hard-working member of the staff. Her efforts in the field of dental health education during visits to schools continue to bear fruit and constitute a valuable means of gathering recruits for conservative dentistry.

The orthodontic service is being maintained at approximately the same level.

Regular visits are being paid to the boys at Aldwark Manor Special School (see paragraph on school).

Dental Treatment

	1957		1958	
	School-children	All Cases	School-children	All Cases
(a) by Dental Officers—				
Cases	4440	4875	4440	4850
Attendances	10400	11332	10824	11690
Fillings	2966	3069	3385	3524
Extractions	9660	12804	9970	10795
Other Operations	3888	4101	3712	3851
(including Radiography)				
Administration of General				
Anaesthetics	1499	1823	1694	1956
(b) by Dental Hygienist —				
Cases	849	968	1309	1444
Attendances	1465	1740	1959	2217
Scaling and Gum Treatment	896	1135	1310	1507
Polishing and Oral Hygiene	1431	1694	1923	2170

Dental Treatment of Non-School Cases

	HEALTH COMMITTEE			*Children's Committee
	Children under 5 years	Expectant and Nursing Mothers	Ineducable Children	
(a) By Dental Officers—				
Cases	228	180	1	1
Attendances	315	549	1	1
Extractions—				
(1) Temporary Teeth	642	—	5	—
(2) Permanent Teeth	—	1765	2	—
Fillings—				
(1) Temporary Teeth	5	—	—	—
(2) Permanent Teeth	—	134	—	—
Other Operations	20	118	—	1
(including Radiography)				
Administration of General Anaesthetics	136	125	1	—
(b) By Dental Hygienist—				
Cases	2	133	—	—
Attendances	2	256	—	—
Scaling and Gum Treatment	—	197	—	—
Polishing and Oral Hygiene	2	245	—	—

* In addition 33 children of school age were inspected on admission to the Children's Homes or on being boarded out.

(j) Child Guidance

Report by Dr. J. Mackay, Consultant Psychiatrist.

STAFF

There were no changes in the clinic staff during the year. We have, however, lost the services of Mr. Francis, the Speech Therapist, who has taken up another appointment in the West Riding. His advice was always welcome and we shall miss his expert knowledge.

CLINICAL

151 new cases were seen during the year. This number included 31 children referred by the Juvenile Court for a psychiatric report. In 12 instances it was recommended that admission to an approved school was desirable. 9 children were regarded as being in need of care and the Court was advised to commit them to the care of the Local Authority while 6 children were judged to be suitable for a course of Child Guidance, and 3 for probation. One was referred to the Senior Medical Officer with the advice that he should be admitted to Aldwark Manor Boarding (E.S.N.) School.

Parents were encouraged to have interviews with the Social Workers at the clinic rather than at home where domestic difficulties might prove a bar to free discussion. Another advantage of such an arrangement is that the Social Worker has ready access to the advice of the Psychiatrist and Psychologists for example over an acute emotional crisis or an educational problem.

Environmental difficulties were vigorously tackled by Mrs. Aitken and Mrs. Stringer. In this connection I have to acknowledge gratefully the ready help of the officials of the City Treasurer's Housing Section.

Play therapy continued to be used in the majority of cases with good effect and new ideas, techniques and play material were constantly introduced. A recent addition to clinic property has been a tape recorder which serves a variety of purposes. It proves invaluable where the child tends to be orally inhibited. To hear a reproduction of the voice and the favourable comments of the therapist in the recording helps to hasten a happy clinic relationship, increases the child's confidence and creates an enthusiasm for further attendances.

OBSERVERS

Observers at the clinic sessions included social science students and student health visitors. Midwives attending a Refresher Course arranged by the Health Department also attended the clinic. They listened to talks on Child Guidance and were shown round the premises and given some insight into the work.

WAITING LIST

This has now virtually disappeared, the Social Workers communicating with the parents within a week or two of the child's referral to the Clinic.

To my colleagues I wish to express my gratitude for yet another year of steady and conscientious work.

I am also indebted to Dr. Cann and his staff for their assistance in administrative matters.

Mrs. Herbert continued to act with competence and cheerfulness as Clerk-Receptionist.

The following table summarises the work done at the Child Guidance Clinic :

Classification	1st Attendances (New Cases)	Later Attendances (All Cases)	Total Attendances
Maladjustment	82	2218	2300
Maladjustment and Epilepsy	3	4	7
Hysterical attacks	2	42	44
Anxiety State	9	114	123
Enuresis	5	186	191
Enuresis and Encopresis	4	56	60
Alopecia	1	23	24
Mutism	1	8	9
Migraine attacks	1	5	6
Speech Disability	—	75	75
Educational Retardation	8	521	529
Temper Tantrums	4	109	113
Total	120	3361	3481

(k) Speech Therapy

Speech Therapy Clinics were held as before at Kingston College Clinic, Central School Clinic and Park Avenue Special School with two Speech Therapists working full-time until the end of June when one Speech Therapist resigned. The other resigned at the end of August ; so this service was of necessity discontinued for the remainder of the year.

The following table summarises the work done at the speech clinic :

DEFECTS	INSPECTIONS		TREATMENTS	
	New Cases	Total Attendances	New Cases	Total Attendances
Stammer	20	108	7	400
Stammer and Dyslalia	3	16	3	111
Dyslalia	44	195	32	873
Hyper-Rhinophonia	2	8	2	46
Dysarthria	—	1	—	3
Cleft Palate	—	17	—	50
Retarded Speech and Language	2	9	1	21
Diagnosis Deferred	4	4	1	1
No abnormality diagnosed	8	9	—	2
Total	83	367	48	1507

(l) Foot Defects

The following table shows the defects treated by the chiropodists :

Defects	No. of Cases	Attendances
Injury from badly fitting shoes	411	411
Poor Hygiene	6	6
Corns	226	226
Callosities	133	133
Verruca Pedis	390	2273
Tinea Pedis	8	8
Other Skin Conditions	8	10
Nail abnormalities	184	190
Circulatory disorders	4	4
Hallux Valgus	185	185
Other toe deformities	45	48
Pes Planus	13	13
Pes Cavus	31	31
Valgus feet and ankles	103	104
Miscellaneous	34	34
	<hr/> 1781	<hr/> 3676

In addition 5 pre-school cases were treated (1 with injury from badly fitting shoes, 2 with nail abnormality, 2 corns) involving 5 attendances. 1 attendance was also made by an ineducable child with a nail abnormality.

VII—INFECTIOUS DISEASES (PROPHYLAXIS)**(a) Mass Radiography and B.C.G. Vaccination Scheme**

The year 1957 had ended with a residue of 482 children who, due to absence from school or some other reason, had not started or did not complete the course of testing, reading and where necessary, vaccination.

Arrangements were made in 1958 for these children to be dealt with and 379 were tuberculin tested. Of the 358 cases where a reaction was ascertained, 86 (24.02%) were found to give a positive result and 265 of the remaining 272 tuberculin negative cases were vaccinated.

A total of 822 positive reactors from the 1957/58 programme were x-rayed at the Mass Radiography Unit in Baker Street and 14 of these children were recalled for large films to be taken, with the following results :—

Referred to Chest Clinic—

Active Post Primary Tuberculosis .....	.....	.....	1
Inactive Post Primary Tuberculosis .....	.....	.....	5
Healed Primary Tuberculosis Complex .....	.....	.....	2
Bronchiectasis .....	.....	.....	1
Pneumonitis .....	.....	.....	1

No action—

Inactive Post Primary Tuberculosis .....	.....	.....	1
No Significant Abnormality .....	.....	.....	3

The active pulmonary tuberculosis case was admitted for Sanatorium treatment in January 1958, and was discharged in September to continue treatment at home.

The plan for the x-raying of family contacts of those pupils showing a positive result to the tuberculin test followed the pattern of previous years ; there was, however, a decrease in the number of volunteers. Some 870 letters to the parents or guardians of the pupils brought in 379 replies which yielded the names of 615 contacts who volunteered to undergo chest x-ray. 466 actually attended at the Mass Radiography Unit and 19 of these were recalled for large film examination with the following results :—

Referred to Chest Clinic

Inactive Pulmonary Tuberculosis .....	.....	.....	2
Bronchiectasis .....	.....	.....	1

No Action—

No significant abnormality	16
----------------------------------	-------	-------	----

A number of replies was received with the information that members of the family had already attended or arranged to attend for Mass X-Ray, and it may be that this applied in the case of some of those who did not reply.

B.C.G. Vaccination of 13 year old Children, 1958/59

It was possible to compress the programme of sessions into a shorter period than previously and the 66 schools were dealt with between the 10th October, 1958, and the 12th December, 1958. The results of these sessions are shown in the following table. Of the 695 children who remain to be dealt with in early 1959 a proportion could not be done at the time arranged, having recently been vaccinated against poliomyelitis.

The majority of the children who showed a positive result to the test have been x-rayed and arrangements are in hand for the remaining children and for family contacts to be x-rayed early in 1959.

B.C.G. Vaccination of School Children, 1958/59

	No. on Roll		No. of Consents		Percentage of Consents		No. Tested Result Known		No. Positive		Percentage Positive (Percentage of total nos. read)		Tested but course not completed		Received B.C.G. Vaccination	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Total	2457	2085	1786	1562	72.69	74.92	1402	1262	287	246	20.47	19.49	132	118	1072	977
Pupils not resident in Kingston upon Hull	96	48	79	38	82.29	79.17	65	32	21	6	32.31	18.75	7	1	43	26
Pupils resident in Kingston upon Hull	2361	2037	1707	1524	72.30	74.82	1337	1230	266	240	19.90	19.51	125	117	1029	951

(b) Poliomyelitis Vaccination

Number of school children fully vaccinated during 1958 :-

At Clinics	25214
By General Practitioners	7067
	<hr/>
	32281
	<hr/>
One injection only	3,145

(c) **Diphtheria Immunisation**

The table below relates to immunisation of school children only but it must not be forgotten that many children have been immunised before commencing school attendance.

	At Clinics	At Schools	Total
Immunised	50	128	178
Re-inforcing Injection.....	11	3187	3198

VIII—INFECTIOUS DISEASES (INCIDENCE)

The notifications of infectious diseases among school children are shown below :

Disease	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total 1958	Total 1957
Scarlet Fever	85	123	37	36	281	189
Diphtheria	1	—	1	—	2	6
Poliomyelitis	—	—	2	3	5	1
Encephalitis	—	—	—	1	1	—
Erysipelas	—	1	—	—	1	1
Dysentery	10	24	10	30	74	226
Pneumonia	10	11	3	16	40	64
Whooping Cough	6	10	5	12	33	199
Measles	3	141	334	1347	1825	1251
Food Poisoning	1	—	—	—	1	3

IX—MORTALITY AMONG SCHOOL CHILDREN

The table printed below shows the causes of death among school pupils during the year.

Disease or other Cause	Male	Female	Total
Pneumonia, Diabetes and Crohn's disease	1	—	1
Miliary tuberculosis	1	—	1
Appendix peritonitis	1	—	1
Cerebral tumour	1	—	1
Leukaemia	1	—	1
Congenital heart disease	—	1	1
Motor Accidents	3	1	4
Drowning	—	1	1
Other accidents	1	1	2
Total	9	4	13

X—HANDICAPPED PUPILS**(a) Ascertainment**

There was no change in the arrangements for ascertainment of handicapped pupils.

Recommendations of examining medical officers relating to the ascertainment of educationally subnormal pupils are given below. The figures include cases examined for the first time, re-examinations of pupils not previously classified as educationally subnormal, and re-examination of pupils previously classified as educationally subnormal who had not been admitted to a special school.

The figures relating to reports to the Local Health Authority do not agree with those given on page 44 since actual reports are not always made in the same year as the recommendations, and the figures on page 44 include cases reported after attendance at a special school.

Report to Local Health Authority—

Incapable of receiving education at school	15
Inexpedient to be educated in association with other children	—
Requiring supervision on leaving school	11

Educationally Subnormal—Special Educational Treatment in—

(a) Day Special School	38
(b) Residential Special School	2
(c) Ordinary School	121
Not Educationally Subnormal	75
Classification deferred.....	51
	—
	313
	—

(b) Special Schools

The numbers on the registers of each of the special schools on the 18th January, 1958, were as follows :

Park Avenue (Physically Handicapped)	68
Northumberland Avenue (E.S.N.)	162
Cottingham Road (Open Air)	201

Sutton (Deaf)	.....	.....	.....	.....	.....	47
Wold Road (Partially Sighted)	.....	.....	.....	.....	.....	47
Aldwark Manor Boarding (E.S.N.)	.....	.....	.....	.....	.....	58

The figures include three deaf or partially deaf, four physically handicapped, one educationally sub-normal (Day Special School) and 48 educationally sub-normal (Boarding Special School) pupils resident in the areas of other Local Education Authorities. Responsibility for the cost of their education has been accepted by the Authorities concerned.

Regular inspections of the special defects concerned were carried out by approved medical staff.

Park Avenue School for Physically Handicapped Pupils

Two hand-propelled wheelchairs have been provided for severely handicapped children, being used in the first instance by two cases of muscular dystrophy. They are of the latest design and of light weight. The playground has been resurfaced and the step between the open and covered areas eliminated. Redecoration has brightened very considerably the entire internal aspect of the building. The conversion of the boot repairing shop for a woodwork room is almost completed, so this subject will appear in the curriculum early in 1959.

A Parent-Teacher Association has been formed and two successful meetings have already been held.

One whole-time and one part-time physiotherapist were employed at the school throughout the year. A second part time physiotherapist commenced duty on the 29th October. Unfortunately no speech therapist has been available since August.

A summary of the inspections and treatments carried out at the school is given below.

Inspections by Orthopædic Consultant	.....	.....	51
Inspections by Consultant Pædiatrician	.....	.....	61

Treatments—

(a) Registered Pupils :—

Remedial Exercises.....	.....	.....	.....	.....	1791
Electrical	.....	.....	.....	.....	54
Minor Ailments	.....	.....	.....	.....	635
Plaster of Paris Splints	.....	.....	.....	.....	4
Speech Therapy	.....	.....	.....	.....	172
Miscellaneous	.....	.....	.....	.....	282

(b) Cerebral Palsy Out-Patient treatments 328

Orthopædic appliances were provided and repaired under National Health Service arrangements.

During the year 10 pupils were admitted to hospitals for surgical treatment.

The cases inspected included one child resident in the East Riding and 15 attendances by children not yet of school age.

During the year 12 children left the school in the following circumstances :

Transferred to ordinary school	4
Transferred to Boarding Special (P.H.) School	2
Left at 15 years	2
On attaining 16 years	2
On attaining 16 years, reported to Local Health Authority for supervision under M.D. Act	1
Left to Independent School	1

Pupils at Park Avenue (P.H.) School as at 31st December, 1958.

Cerebral Palsy : Spastic	30
Athetoid	4
Old Poliomyelitis	9
Muscular Dystrophy	4
Tuberculosis (bone)	2
Perthe's Disease	3
Rheumatoid Arthritis	4
Congenital Heart Disorder	4
Congenital Deformity (limb)	2
Cerebral Degeneration	1
Chronic Nephritis	1
Haemophilia	4
Fractured Skull	1
Spina Bifida	6
Dermatomyositis	1
Spinal cord degeneration	2
Bone dyscrasia	1
Malunited fracture	1

Northumberland Avenue (E.S.N.) School

About half of the internal aspect of the school has been repainted in bright colours and the old urinal stalls have been replaced by terrazo ones. A sink type footbath has been installed in the medical inspection room ; it is useful for washing down occasional incontinent children.

An electric gramophone has been provided for use in dancing and developing musical appreciation. Regular dancing lessons take place with boys and girls together. The Head Master reports that social behaviour as between the sexes is in consequence improved quite noticeably.

The number of formal re-examinations of pupils in attendance at the school carried out during the year was 164.

During the year 26 children left the school in the following circumstances :

Transferred to Boarding Special (E.S.N.) School	2
Reported to Local Health Authority as ineducable	6
On attaining 16 years, reported to Local Health Authority for supervision under M.D. Acts	15
On attaining 16 years not for supervision	1
Left at 15 years, not for supervision	1
Left the City	1

Aldwark Manor Boarding (E.S.N.) School

The number of formal re-examinations of pupils in attendance at the school carried out during the year was 55.

During the year 3 Kingston upon Hull pupils left the school in the following circumstances :

On attaining 16 years, reported to Local Health Authority for supervision	2
Reported to Local Health Authority as ineducable	1

Difficulty continues to be experienced in arranging for dental treatment at this school, which is situated nearly two hours journey by road from Kingston upon Hull. The Principal School Dental Officer has carried out regular inspections at the school and no other arrangement for dental treatment being available, he spent nine more sessions in York using a dental surgery loaned by the York Education Committee. In this way he was able to give dental treatment to 19 pupils from the school, who made 19 attendances in all.

On 24th April, soon after the boys returned from the Easter holiday, chicken-pox appeared. Naturally it was feared that a run of secondary cases would occur over a long period. Actually only 3 more cases developed the complaint on 10th, 11th and 12th May. One was a teacher, which was fortunate in that he continued to give lessons to the infected boys during their enforced isolation.

Hardly was this problem over when a really troublesome outbreak of diarrhæa, due to *Shigella Sonnei*, began. The first case was on the 17th May and the last on 5th June. 7 staff and 25 boys were obviously affected. 2 of the staff and 13 of the boys were bacteriologically positive. Many other boys were probably affected; but it was difficult to obtain information about their stools from those not manifestly ill. It is likely that nearly all were infected. Great difficulty was experienced in getting the boys to co-operate in hygienic precautions and in providing specimens of stools. Finally on 1st July, rectal swabs from all boys and stools from the staff were found to be negative and the ban on admission of new boys was raised. The outbreak illustrated the difficulty in diagnosing and managing an outbreak of bowel infection in a population of subnormal intelligence.

The new cricket pitch came into use during the summer.

Two houses for married staff are being built in the grounds and were nearly ready for occupation at the end of the year.

A boot and shoe cleaning and storage room was added on to the main building with a separate rack for each of the boys.

Cottingham Road (Open Air) School

A full-time nurse and a part-time Physiotherapist were employed at the school and the pupils were kept under close medical supervision and treatment throughout the year. The following table shows the work carried out :

General re-inspections by Medical Officers	.....	.....	461
Shower baths	.....	.....	6766
Cleanliness inspections	.....	.....	6874
Weighing and measuring	.....	.....	3308
Treatments of minor ailments	.....	.....	8022
Remedial exercises including breathing exercises	.....	.....	113
Sunlight treatment	.....	.....	421

During the year 49 children left in the following circumstances :

Transferred to boarding school	.....	.....	.....	1
Transferred to ordinary schools	.....	.....	.....	25
On attaining 16 years, reported to Local Health Authority for supervision under M.D. Acts	.....			1
Left at 15 years	.....	.....	.....	19
Left the city	.....	.....	.....	3

Pupils at Cottingham Road Open Air School (as at 31st December, 1958.)

Asthma	.....	.....	.....	.....	.....	42
Bronchitis	.....	.....	.....	.....	.....	29
Bronchiectasis	.....	.....	.....	.....	.....	9
Quiescent Tuberculosis (Lungs)	.....	.....	.....	.....	.....	10
Quiescent Tuberculosis (Bone)	.....	.....	.....	.....	.....	2
Rheumatism	.....	.....	.....	.....	.....	2
Rheumatic Carditis	.....	.....	.....	.....	.....	1
Congenital Heart Disorder	.....	.....	.....	.....	.....	4
Collapsed Lung	.....	.....	.....	.....	.....	1
Old Poliomyelitis	.....	.....	.....	.....	.....	2
Epilepsy	.....	.....	.....	.....	.....	3
Seborrhoeic Dermatitis	.....	.....	.....	.....	.....	1
Eczema	.....	.....	.....	.....	.....	1
Debility	.....	.....	.....	.....	.....	97
Chronic Nephritis	.....	.....	.....	.....	.....	2
Coeliac Disease	.....	.....	.....	.....	.....	1
Chronic Hepatitis	.....	.....	.....	.....	.....	1

Biscuits continue to be supplied for consumption with the morning milk. The maximum charge to the parents is 2½d. a week.

New woollen blankets were supplied for all children for use during the rest periods, the old ones having become worn.

From November it has been possible to arrange a weekly visit from one of the part-time physiotherapists and this has filled a want felt for several years past. She already has a large group for breathing and foot exercises and correction of faulty postures.

Wold Road (Partially Sighted) School

Fifty new chairs and desks of improved design have been provided. Store cupboards with sliding doors have been fitted below the blackboards in two classrooms. Facilities for science, domestic science and handwork have been improved. A folding semi-recumbent chair, for use with children who are unwell, has also been obtained.

During the year 5 children left the school in the following circumstances :

Transferred to ordinary schools	1
On attaining 16 years	4

Pupils in Wold Road (Partially Sighted) School as at 31.12.58.

Myopia	16
Nystagmus	9
Cataract	3
Optic Atrophy	5
Myopia and Nystagmus	7
Nystagmus and Microphthalmia	1
Nystagmus and Cataract	2
Optic Atrophy, subluxated lenses and Detached Retina	1
Albino (without nystagmus)	2
Congenital glaucoma	1

The pupils are under the regular care of the Ophthalmologist.

Sutton (Deaf) School

The pupils are under the regular care of the Otologist. There are a number of cases at this school resulting from treated tuberculous meningitis, some of whom have motor palsies as well as deafness. These cases would, of course, have died from the original illness in times before the discovery of modern anti-biotic treatment.

During the year 3 pupils left the school on attaining the age of 16 years.

Pupils attending Sutton School for the Deaf (as on 31.12.58).

	Deaf	Partially Deaf
Congenital	36	2
Tuberculous Meningitis	2	—
Meningitis (other)	5	1
Uncertain	1	—

Follow-up of Kingston upon Hull pupils who left Special Schools in 1957 and 1958.

	SCHOOL						
	Park Avenue (P.H.)	Cottingham Road (Open Air)	Northumberland Avenue (E.S.N.)	Aldwark Manor Boarding (E.S.N.)	Wold Road (P.S.)	Sutton (Deaf)	Other Special Schools
Regular Employment	7	28	27	1	7	7	2
Irregular Employment	—	2	7	1	—	—	—
Unemployed	1	3	12	1	—	—	1
Further Education/Training	—	—	—	—	—	—	2
Untraceable	1	—	2	—	—	—	1
Left Area	—	1	1	—	—	—	—

(c) Young Deaf Children not attending schools

In January Miss Archer, the teacher of the deaf appointed to work on pre-school children, commenced duty. Her scope includes all children, whether known to be deaf or only suspected so, who are too young and immature conveniently to attend school. Among these, therefore, are some as yet not fully diagnosed. She sees children with their parents at the Central Clinic and in their homes, attends at the diagnostic sessions of the otologists in the school clinics and at the Victoria Hospital for Sick Children and sees children in the hospital wards when necessary. She keeps in touch with the Head Master of the Sutton School for the Deaf to decide when particular children are ready to enter the school.

An Amplivox individual speech training hearing aid has been provided for use in the clinic. Certain nursery furniture and teaching materials have also been obtained.

Twelve cases were having auditory training at the end of the year and a total of 330 home visits had been made during the year ; but it is as yet too early to make any serious comment on the results. Parents undoubtedly are appreciating the help and moral support provided.

During the winter term Miss Archer was sent for three months to work under supervision at the Audiology Unit of the Royal National Throat, Nose and Ear Hospital, London, by kind permission of the Medical Director, Miss Edith Whetnall, M.S., F.R.C.S., and at the expense of the Kingston upon Hull Education Committee. The experience gained will be of the utmost value.

XI—NURSERY SCHOOLS AND CLASSES

The authority has two nursery schools and 12 nursery classes (at ten schools) with accommodation for 135 in schools and 360 in the classes. Admission is not based on the medical condition of the children, but the school nurses provide information about home conditions, etc., to assist the Chief Education Officer in deciding priorities. Medical officers visited the nursery schools and classes at intervals to carry out routine medical inspections and to make general observations on the children. A school nurse visited each nursery school and class weekly.

XII—PHYSICAL EDUCATION

A report on physical education is included in Appendix II (page 52)

XIII—PROVISION OF MEALS

The School Health Service is not directly concerned with the provision of meals but the statistics printed below may be of general interest.

Total dinners supplied—2,438,825

Month	Largest number of dinners in one week	Largest number of pupils fed in one week
January	57612	11343
February	57658	11352
March	59143	11650
April	58274	11456
May	58285	11466
June	59106	11621
July	56757	11160
August	Holidays	Holidays
September	61336	12075
October	63626	12533
November	63424	12469
December	65005	12792

XIV—MISCELLANEOUS

In addition to the work referred to elsewhere in this report, other duties have been carried out as shown below.

Medical Examinations—

Children, employed out of school hours	916
Children, in connection with theatrical employment.....	36
Children referred from the Juvenile Court	28
Teachers, mostly in connection with absence from duty	7
Students, prior to admission to Training Colleges	112
Teachers, on appointment	154
Tests of first-aid knowledge of adult students of the Nautical College	163

MINISTRY OF EDUCATION STATISTICAL TABLES **for the year ended 31st December, 1958**

FORM 8M

Number of pupils on registers of maintained and assisted primary and secondary schools (including nursery and special schools) in January, 1959 — 55,370

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (by years of birth) (1)	Number of Pupils Inspected (2)	Physical condition of Pupils inspected			
		Satisfactory		Unsatisfactory	
		No. (3)	Percentage of col. 2 (4)	No. (5)	Percentage of col. 2 (6)
1954 and later	180	179	99.4	1	0.6
1953	1807	1802	99.7	5	0.3
1952	2939	2932	99.8	7	0.2
1951	73	73	100.0	—	—
1950	30	30	100.0	—	—
1949	14	13	92.9	1	7.1
1948	1895	1885	99.5	10	0.5
1947	4029	4020	99.8	9	0.2
1946	66	66	100.0	—	—
1945	7	7	100.0	—	—
1944	400	400	100.0	—	—
1943 and earlier	3448	3445	99.9	3	0.1
TOTAL	14888	14852	99.8	36	0.2

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING DENTAL DISEASES AND INFESTATION WITH VERMIN)

Age Groups Inspected (by year of birth) (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Part II (3)	Total Individual Pupils (4)
1954 and later	—	25	25
1953	1	241	242
1952	7	544	550
1951	3	8	11
1950	—	4	4
1949	1	4	5
1948	78	185	248
1947	205	457	631
1946	5	11	15
1945	—	—	—
1944	23	23	44
1943 and earlier	197	321	490
TOTAL	520	1823	2265

TABLE C.—OTHER INSPECTIONS

Number of Special Inspections	8271
Number of Re-inspections...	15114
	23385

TABLE D

INFESTATION WITH VERMIN

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	194821
(ii) Total number of individual pupils found to be infested	3381
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	92
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

PART II

DEFECTS FOUND BY MEDICAL INSPECTION

NOTE :—All defects noted at medical inspection as requiring treatment are included in this table, whether or not this treatment was begun before the date of the inspection.

TABLE A.—PERIODIC INSPECTIONS

Defect or Disease (1)	PERIODIC INSPECTIONS						TOTAL	
	Entrants		Leavers		Others			
	Requiring Treatment (2)	Requiring Observation (3)	Requiring Treatment (4)	Requiring Observation (5)	Requiring Treatment (6)	Requiring Observation (7)	Requiring Treatment (8)	Requiring Observation (9)
Skin	132	41	97	5	127	27	356	73
Eyes : (a) Vision	12	2	220	3	288	24	520	29
(b) Squint	66	20	4	—	16	6	86	26
(c) Other	37	18	19	1	52	11	108	30
Ears : (a) Hearing	28	18	22	8	35	13	85	39
(b) Otitis Media	35	52	7	12	14	34	56	98
(c) Other	29	14	10	—	15	2	54	16
Nose and Throat	360	638	24	13	113	197	497	848
Speech	21	81	5	3	12	11	38	95
Lymphatic Glands	196	541	7	17	51	185	254	743
Heart	15	32	10	16	29	38	54	86
Lungs	46	234	9	29	22	105	77	368
Developmental : (a) Hernia	14	17	4	7	10	3	28	27
(b) Other	24	84	22	15	31	116	77	215
Orthopaedic : (a) Posture	5	24	9	16	12	43	26	83
(b) Feet	39	98	68	30	86	119	193	247
(c) Other	28	66	17	34	32	71	77	171
Nervous System : (a) Epilepsy	5	5	3	2	4	6	12	13
(b) Other	24	27	7	4	24	29	55	60
Psychological : (a) Development	4	13	4	—	6	7	14	20
(b) Stability	11	56	3	2	9	26	23	84
Abdomen	8	19	6	8	9	36	23	63
Other	43	61	25	11	59	96	127	168

TABLE B.—SPECIAL INSPECTIONS

Defect or Disease (1)	SPECIAL INSPECTIONS	
	Requiring treatment (2)	Requiring observation (3)
Skin....	1161	73
Eyes : (a) Vision	91	147
(b) Squint	10	16
(c) Other	516	63
Ears : (a) Hearing	27	25
(b) Otitis Media	24	9
(c) Other	220	60
Nose and Throat	43	42
Speech	7	6
Lymphatic Glands	8	7
Heart	1	2
Lungs	15	7
Developmental : (a) Hernia	—	1
(b) Other	1	1
Orthopaedic : (a) Posture	5	2
(b) Feet	33	29
(c) Other	5	12
Nervous System : (a) Epilepsy	2	—
(b) Other	7	4
Psychological : (a) Development	1	1
(b) Stability	14	5
Abdomen	2	7
Other	4618	671

PART III

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	1408
Errors of Refraction (including squint)	7336
Total	8744
Number of Pupils for whom spectacles were prescribed	3920

TABLE B.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	74
(b) for adenoids and chronic tonsillitis	1857
(c) for other nose and throat conditions	517
Received other forms of treatment	134
Total	2582
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1958	12
(b) in previous years	73

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Number of pupils known to have been treated at clinics or out-patients departments	643
(b) Pupils treated at School for Postural defects	113
Total	756

TABLE D.—DISEASES OF THE SKIN (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE D OF PART I)

	Number of cases known to have been treated
Ringworm—	
(i) Scalp	3
(ii) Body	17
Scabies.....	130
Impetigo	660
Other skin diseases	1170
Total	1980

TABLE E.—CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics	249
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TABLE F.—SPEECH THERAPY

Number of pupils treated by Speech Therapists	147
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TABLE G.—OTHER TREATMENT GIVEN

[illegible]

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

1	Number of pupils inspected by the Authority's Dental Officers—										
(a)	At Periodic Inspections	....	....	....	....	....	....	....	....	....	3587
(b)	As Specials	....	....	....	....	....	....	....	....	....	4044
Total		....	....	....	....	....	....	....	....	....	7631
2	Number found to require treatment										
3	Number offered treatment										
4	Number actually treated										
5	Number of attendances made by pupils for treatment including those shewn under 11(h)										
6	Half-days devoted to Periodic (School) Inspection	25	} Total	....	....	....	....	....	....	....	1322
	Treatment*	1297									
7	Fillings	Permanent Teeth 3350	} Total	....	....	....	....	....	....	....	3385
		Temporary Teeth 35									
8	Number of teeth filled	Permanent Teeth 3001	} Total	....	....	....	....	....	....	....	3035
		Temporary Teeth 34									
9	Extractions	Permanent Teeth 3377	} Total	....	....	....	....	....	....	....	9970
		Temporary Teeth 6593									
10	Administration of general anaesthetics for extractions										
11	Orthodontics—										
(a)	Cases commenced during the year	....	....	....	....	....	....	....	....	....	82
(b)	Cases carried forward from previous year.	....	....	....	....	....	....	....	....	....	150
(c)	Cases completed during the year	....	....	....	....	....	....	....	....	....	33
(d)	Cases discontinued during the year	....	....	....	....	....	....	....	....	....	36
(e)	Pupils treated with appliances	....	....	....	....	....	....	....	....	....	230
(f)	Removable appliances fitted	....	....	....	....	....	....	....	....	....	164
(g)	Fixed appliances fitted	....	....	....	....	....	....	....	....	....	—
(h)	Total attendances	....	....	....	....	....	....	....	....	....	1636
12	Number of pupils supplied with artificial teeth										
13	Other Operations—	Permanent Teeth 3639	} Total	....	....	....	....	....	....	....	68
		Temporary Teeth 73									
				....	....	....	....	....	....	....	3712

*The total number of sessions devoted to treatment of all types of cases was 1400. Separate sessions were not devoted to the treatment of non-school cases. The time devoted to the treatment of cases other than school pupils is estimated at 103 sessions, leaving 1297 sessions devoted to the treatment of school pupils.

FORM 21 M.

HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES

	(1) Blind (2) Partially Sighted		(3) Deaf (4) Partially Deaf		(5) Delicate (6) Physical-ly Handi-capped		(7) Educa-tionally sub-normal (8) Malad-justed		(9) Epil-epctic	Total 1-9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
During the Calendar Year ended 31st December, 1958										
A. Handicapped pupils <i>newly placed</i> in Special Schools (other than hospital special schools) or Boarding Homes	1	8	1	1	44	18	32	—	—	105
B. Handicapped pupils, <i>newly assessed</i> as needing special education or treatment at Special Schools or in Boarding Homes	—	6	1	—	55	18	34	—	—	114
On or about 31st January, 1959										
C. Number of Handicapped pupils from the area :										
(i) on the registers of Special Schools as—										
(a) Day pupils	—	47	40	4	203	73	171	—	—	538
(b) Boarding pupils	9	1	4	1	1	4	10	—	—	30
(ii) on the registers of independent schools under arrangements made by the Authority	—	—	—	1	—	—	—	—	—	1
(iii) Boarded in Homes	—	—	—	—	—	—	—	—	—	—
Total (C)	9	48	44	6	204	77	181	—	—	569
D. Number of handicapped pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(i) in hospitals.....	—	—	—	—	—	—	—	—	—	—
(ii) in other groups	—	—	—	—	—	—	—	—	—	—
(iii) at home	—	—	4	—	—	1	—	—	—	5
E. Number of handicapped pupils from the area requiring places in Special Schools—										
(i) Total—										
(a) Day	—	—	1	—	2	—	11	—	—	14
(b) Boarding	—	—	—	—	—	—	—	—	—	—
No. of pupils included in the totals above—										
(ii) who had not reached the age of 5										
(a) awaiting day places	—	—	1	—	—	—	—	—	—	1
(b) awaiting boarding places	—	—	—	—	—	—	—	—	—	—
(iii) who had reached the age of 5 but whose parents refused consent to their admission to a Special School :										
(a) awaiting day places	—	—	—	—	—	—	9	—	—	9
(b) awaiting boarding places	—	—	—	—	—	—	—	—	—	—
F. Number of handicapped pupils who were on the registers of hospital Special Schools.....										5
G. Number of children reported to the Local Health Authority during calendar year ended 31st December, 1958, under :—										
(a) Section 57(3) (excluding any returned under (b))										26
(b) Section 57(3) relying on Section 57(4)										—
(c) Section 57(5)										31
of the Education Act, 1944										

NOTE : (1) Apart from the pupils listed at D.(i) above, regular teaching is provided in those hospitals in the area of the Local Education Authority for pupils (not ascertained as handicapped) who happen to be in hospital for any reason.

(2) In the same way a number of pupils (not ascertained as handicapped and not included under D.(iii)) are provided with home tuition when absent from school for prolonged periods for any reason.

APPENDIX I

DEAF EDUCATION IN KINGSTON UPON HULL IN THE LAST CENTURY AND THE ORIGINS OF THE SUTTON SCHOOL FOR THE DEAF

When looking up the early reports of the School Health Service in connection with a summary of its first 50 years (Appendix I, Annual Report, 1957), it was noted that only two special schools were already established in 1908, the year of the first Annual Report. Blenkin Street (M.D.) School had opened in 1907; but the School for the Deaf dated back much further. It was thought that its early story might prove interesting.

The earliest record found is a circular letter addressed to one Reuben Craven of 22 Charlotte Street dated 18th July, 1842, from the Yorkshire Institution for the Deaf, Doncaster. There were five pupils in the Institution from the Kingston upon Hull area and the total subscriptions from that area in the previous year had been £38. The parents' payments had totalled £34. The maintenance costs in the Institution were not less than 100 guineas leaving £33 to be met from subscriptions from other parts of the county. The Committee felt "confident in requesting increased subscriptions" from the town. Parents were charged on a sliding scale with a minimum of £6 per annum.

Before 1894, the school in the Deaf Institution, Spring Bank

The next record is in the Annual Report, 1885, of the Hull, East Yorkshire and Lincolnshire Institution for the Deaf and Dumb, which had then been in existence for many years though no earlier reports survive. The Institution incorporated a residential school which must also have been established for some years, for a total of 68 pupils are stated to have passed through the school since it began. The Master, Mr. Walter McCandlish, received £120 per annum and board-residence. His wife acted as Matron and also taught. The subscribers were requested to inform the Secretary about deaf and dumb children aged between 5 and 12 years because parents were frequently neglecting to apply until too late an age. The advantages of an early start in deaf education are emphasised in this and subsequent Annual Reports.

At the annual meeting a "number of pupils went through several exercises" including the "lipreading of those children who were totally deaf and the audible reading and speaking of those who were till recently totally dumb." One read the "Charge of the Light Brigade" and "a portion of the scriptures selected by a person in the audience;" "his utterances were quite distinct." There were 21 pupils on roll.

Various benefactors were thanked for kindnesses to the children including gifts, magic lantern shows, free admission to a Chapel Bazaar and to the "Diorama." Similar thanks are given in later reports for books, clothing, toys, oranges, buns, annual teas, a dolls' house, a flag and staff, a rocking horse, and for visits to "Panorama," "dissolving views," Welton Hall, Wombwell's menagerie, an Ecclesiastical exhibition, Newington Church Bazaar, and for free admission to the Corporation swimming bath.

In 1886 a new school room was completed in the rear of the Institution with a frontage to Grey Street. Grey Street still represents the rear of the Institution grounds in 1958; so in 1886 the site was more or less as at present with the main frontage on Spring Bank. A covered way connected the new school room to the main building. The room was the upper floor of a two-storey block. The ground floor, which was concreted, was used as a covered playground with "gymnastic appliances;" it had "good side windows" and the garden end was quite open. The kitchen, no doubt in the main block, was "greatly enlarged," "a new bathroom erected for the girls and one of the bedrooms fitted up with a bath for the boys, new and separate lavatories provided and numerous other substantial improvements made." New furniture was obtained. "Every child in the Institution was now provided with a separate bed having a grecian spring mattress, hair mattress and an abundance of good bedding." A "valuable library suitable for juveniles and adults" and "innocent and instructive games and puzzles" were available.

In 1886 three youths were apprenticed through the Alderman Cogan Charity as woodcarver, tailor and plumber-glazier-gasfitter. Each subsequent Annual Report mentions more children as being apprenticed on leaving. The Institution pursued a continuous policy of pressing parents to put their children to jobs, "with a future." Trades mentioned include painter, decorator, paperhanger, baker, dressmaker and cabinetmaker.

There were 13 boarders and 10 day pupils on roll in 1886.

In 1888 a pupil teacher was engaged to help the Master at £55 per annum. Pupils boarding included children from Kingston upon Hull, East Riding, Grimsby and Lincolnshire. "Most are totally deaf; a few are capable of hearing a loud noise; but none can hear ordinary speech." The number of applications for admission as boarders exceeded the accommodation. Applications again exceeded vacancies in 1889.

In 1889 the Committee continued "to adopt the combined method of teaching as they are strongly of the opinion that this method imparts the best qualifications for the practical duties of life." Each child now had his own garden and the Corporation swimming bath was available to the pupils. At the Annual

Meeting fears were expressed that the anticipated new legislation would result in day schools for the deaf; apparently the Institution was strongly in favour of residential education. "The pupils were put through a variety of exercises including lipreading, speaking audibly, freeland drawing with both hands, reading, answering biblical questions proposed by the audience and simultaneous finger spelling, signing and articulation of the Lord's Prayer." "One child also drew on the blackboard a clever sketch of Her Majesty the Queen." "Articulation and lipreading are systematically taught them while the sign and manual method receives a fair share of attention for the Committee are strongly of opinion that the combined method of instruction affords the greatest advantages and best qualifies the children for the ordinary duties of life." So do we meet with the divergence of opinion on manual as opposed to oral methods of communication which continues to the present day.

In 1892 the Committee was still anxious for pupils to be apprenticed on leaving and records with irritation an instance of a parent refusing to allow a promising boy to be helped in this way. A meeting was held on 7th November in Grimsby Town Hall preceded by "a sumptuous tea" for the pupils and others present. The pupils demonstrated their achievements; one ex-pupil now at the Kingston upon Hull School of Art shewed three oil paintings.

On 12th March, 1893, there was an inspection by Rev. T. W. Sharp, Her Majesty's Inspector, who reported that the children were "happy, well-fed and taught with intelligence." The Privy Council Education Department had certified the Institution temporarily for the education, boarding and lodging of 20 deaf pupils and for 20 day scholars in addition. At the same time it was pointed out that "the building, playground and school appliances were insufficient to meet fully and permanently the requirements of the district." The Committee found that "new premises such as would satisfy the Privy Council Education Department would involve an outlay of a few thousand pounds." Moreover the new Act provided "that under a voluntary Board of Management, one third of the annual cost must be raised by private contributions." The Committee decided, having regard to limited revenue, to discontinue providing education for children of school age, thus placing that responsibility on the School Boards concerned. The new Act, of course, required each School Board to make provision for all deaf children between 7 and 16 years when not otherwise being educated. "The hope of the Committee was that the School Board would have seen their way to erect a (residential) institution and trained the children therein." The School Board, however, decided in favour of day classes only, a policy which has been continued to the present day. Letters passed between the Institution and the School Board after the passing of the Elementary Education (Deaf and Blind Children) Act, 1893, which received the Royal Assent on 12th September. The School Board agreed to provide for the deaf children from June, 1894.

During 1893 "two pupils suffering from whooping cough were promptly sent home on the advice of the Honorary Surgeon. One speedily recovered but the other having shewn unmistakable signs of paralysis and inability to grasp his school lessons, the Committee, after great reluctance, decided that he was not a fit case for this Institution." The deaf and dumb adults voluntarily raised a fund which met the cost of painting the school room. The Committee repeated that "while giving special prominence to oral instruction we have continued the combined method."

In 1894 Mr. McCandlish is listed in the Institution's Annual Report as "Missionary and Collector"—not "Master." He apparently accepted for a time, however, a simultaneous appointment under the School Board in one of the new classes as did Mrs. McCandlish. He gave continued service to the Institution till his death in 1924. He seems to have remained a staunch advocate of the combined oral and manual methods of communication. From 1894 the Institution, now the Hull and East Riding Institution for the Deaf and Dumb, has not provided school age education; but it still maintains cordial close contact with the school and co-operates with the Youth Employment Service in placing deaf school leavers in employment and in following up their careers.

1894-1895 Day Classes

In March, 1894, the School Board resolved "that deaf and dumb children be not sent to any (residential) institution but that provision be made for their education at a (day) centre or centres." Mr. McCandlish, Mrs. McCandlish and a Mr. Pemble of Chatteris were appointed to the School Board's Service and they commenced duty on the 30th July, 1894. Three classes were opened at Sir Henry Cooper School in Bean Street (Mr. McCandlish) Central Higher Grade School in the present College of Commerce in Brunswick Avenue (Mrs. McCandlish), and Craven Street Higher Grade School (Mr. Pemble). The salaries were £120, £100, and £100 per annum respectively. Children from Manchester, Hessle, Spilsby, Broomfleet and Norwich attended and were presumably boarded out; it seems that some at any rate continued to board at the Deaf Institution, for as late as 1897 Her Majesty's Inspector was complaining about this as mentioned below.

In November, 1894, an inspection by Her Majesty's Inspector was followed by a report advising a change to a single centre for the older pupils with subsidiary centres for the younger children, because in the existing all-age classes one teacher was inadequate for the number of pupils. He also mentioned certain structural inadequacies at Craven Street Higher Grade and Sir Henry Cooper Schools. It was resolved "that the Board's Medical Officer be requested to visit the Deaf-Mute Centres to examine and report on the capability of the several children to receive instruction." Dr. James Fraser reported that certain cases could hear and certain others were unlikely to benefit from instruction. It was resolved that the former be sent to ordinary schools and the latter "withdrawn from classes."

Mr. McCandlish resigned from the School Board's Service and ceased duty on 21st December, 1894. Miss Ethel Manger was appointed to succeed him. Official approval now arrived from the Privy Council Education Department for accommodation for 30 pupils at Central Higher Grade School, 27 at Craven Street Higher Grade School and 17 at Sir Henry Cooper School.

In January, 1895, Dr. Fraser advised that another deaf mute was ineducable. In February, 1895, in response to an enquiry from Her Majesty's Inspector, the School Board reaffirmed that it desired the deaf mutes to be examined on the oral system only. In May a letter from the Privy Council Education Department advised that deaf mutes should always be taught cookery, laundry and wood work in classes separate from normal children. In August "My Lords" were "pleased to renew their certificate" for the deaf-mute centres.

In September, 1895, as a result of a report from Her Majesty's Inspector, the Clerk to the School Board was instructed to report on the comparative cost of educating deaf mutes in day centres and at residential institutions out of town. He reported that the probable number of deaf mutes in Kingston upon Hull was 30-35, to send these to residential institutions would cost annually some £550 to £600 whereas at a day centre it would cost £320 towards which in grants and outside contributions some £270 to £280 would be received leaving £60 to £70 to be paid by the School Board. The Clerk was required to report on whether the premises at the Central Higher Grade School could accommodate such a centre. Apparently he reported that it could be done for in October, 1895, it was resolved that approval be requested from the Privy Council Education Department for the removal of all the deaf children to the Central Higher Grade School to occupy two classrooms with three teachers. On the 27th November, 1895, the Privy Council Education Department's letter confirmed that the Central Higher Grade School was now certified for the education of 60 deaf children, the other two centres to be closed down. It was resolved by the School Board that the children be reassembled after the Christmas holiday at the Central Higher Grade School under the general superintendence of Mr. Pemble.

Mrs. McCandlish resigned and ceased duty at Christmas, 1895.

1896-1904 A single school in association with the Central Higher Grade School.

When the schools opened after the Christmas holiday on 6th January, 1896, all the deaf children were at the single centre in the Central Higher Grade School.

On 3rd July, 1897, Her Majesty's Inspector reported :—"It would be advisable to remove the three children at present being hoarded at Spring Bank (*i.e.* the Deaf Institution) to some other place. If the Managers of this school intend that the children should be taught on the oral system, care must be taken that those children who have to be boarded out are not placed with people

who will communicate with them only by signs. Unless this is done Her Majesty's Inspector cannot recommend renewal of the (school's) certificate (as a school for the deaf.)" Evidently children were still boarding at the Deaf Institution. A little later a letter came from the Spilsby Poor Law Union asking whether the Kingston upon Hull School Board considered Mr. and Mrs. McCandlish as fitting foster parents for a deaf mute in view of their "giving an understanding not to communicate with the child by manual signs." It was resolved that the Clerk reply "in terms of the draft read."

In 1897 the Annual Report of the Deaf Institution, which was still continuing its activities with those who had left school, remarks on a repercussion of the new leaving age of 16 in the 1893 Act. Difficulty was being experienced in getting employers to accept the deaf boys for apprenticeships when leaving school two or more years older than the general run of boys. This complaint is frequently repeated in later years and is still, to a lesser degree, a problem in 1958.

On the 12th September, 1898, "the school was closed this morning on account of the visit of Barnum's Show to the town. The school was opened in the afternoon; but as only one child attended the register was not marked."

In September, 1899, after Her Majesty's Inspector's report the Privy Council Education Department wrote "My Lords will be glad to learn whether the Board proposes to take any steps with regard to the provision of more satisfactory school accommodation. The inspector reports that the classroom in which the school is held cannot be considered as suitable for permanent occupation." A similar letter arrived in July, 1900. Again in September, 1901, a letter from the new Board of Education said "the Board hopes that no time will be lost in the submission for approval of the scheme for the provision of a centre in connection with Osborne Street Board School." However in 1904 the year opened with the deaf pupils still at the Central Higher Grade School.

1904-1936 The Centre in Osborne Street School

On the 15th February, 1904, the school opened in part of the building of the Osborne Street School. In August, 1904, the Head Master noted with satisfaction that the premises were much more suitable. However, as the years passed, standards rose and complaints about the premises and the lack of separate accommodation for the deaf school began to be heard.

1937 onwards. Sutton School for the Deaf

The school moved at the end of 1936 into more roomy premises in a former elementary school building at Sutton in rural surroundings on the edge of the growing city. Already there are signs that the city housing will reach and eventually surround the school. Fortunately the Local Education Authority is taking steps to acquire land round the school for playing fields.

Numbers on roll

1885	21		1892	Day 10	Boarding 19	1898	Day 33
1886	Day 10	Boarding 13	1893	Day 15	Boarding 23	1899	Day 32
1888	Day 9	Boarding 18	1894	Day 35		1902	Day 34
1889	Day 9	Boarding 17	1896	Day 34		1903	Day 39
1890	Day 13	Boarding 18	1897	Day 32		1904	Day 34

Comment

The above notes are factual extracts from the sources listed below. In reading these old records, however, it is impossible to avoid becoming vividly aware of the (probably bitter) controversy between the Deaf Institution staff, who believed in residential schooling and manual methods of communication from an early age, and the School Board staff supported by Her Majesty's Inspectors, who advocated oral methods only. Mr. and Mrs. McCandlish were the active agents of the Deaf Institution ; they had the "know how." It is understandable that their attitudes would strongly influence those of their committee. They could not stomach the refusal of the School Board to allow manual methods and so they quite properly resigned. Mr. and Mrs. McCandlish must have proved a thorn in the flesh of the School Board for many years after, openly advocating manual methods and giving moral support to any person who chose rightly or wrongly to criticise the results of the School for the Deaf.

This controversy has never died out ; but fortunately the bitterness has gone leaving friendly disagreement. The Deaf Institution staff still openly advocate manual methods from the start while the teachers of the School for the Deaf permit oral methods only.

The situation has apparently been the same in other parts of the country. It is interesting to note, however, that in recent years at least one head teacher of a school for the deaf has written advocating the combined method (Greenaway, *Silent World*, 1958, Jan., Feb., Mar.)

Sources

- (1) Circular letter from Yorkshire Institution for the Deaf, 1842.
- (2) Annual Reports of the Hull, East Yorkshire and Lincolnshire Institution for the Deaf and Dumb, 1885, 1886, 1888, 1889, 1890, 1892, 1893, 1894, 1896, 1897, 1923, 1924.
- (3) Minutes of the School Management Committee of the Kingston upon Hull School Board, 1892-1898.
- (4) Log Book (one continuous book) of the Central Higher Grade School Deaf Department, Osborne Street School for the Deaf and Sutton School for the Deaf.

APPENDIX II

REPORT ON PHYSICAL EDUCATION

The physical education programme in school aims at improving the physical development and assisting the normal growth of the children through regular lessons in gymnastics, dance, games, swimming and also through organised outdoor activities.

The physical education scheme must to a large extent be dependent upon the facilities available and in Kingston upon Hull the new schools have been provided with excellent facilities for the subject. Much has been done also to improve the facilities for the older schools near the central areas of the city so that a full programme of physical activity may be carried out.

Arrangements are made so that every boy and girl of appropriate age visits the playing fields for organised games and those children attending the schools in the centre of the city are conveyed to the larger playing fields on the outskirts.

Swimming instruction is considered of the utmost importance. Every swimming bath available in the city is used. Since this will not allow children of all age groups to attend for swimming instruction, priority is given to non-swimmers so that every child at some time during his school career has the opportunity to learn to swim.

All the above activities are organised as part of the normal school curriculum. In all schools encouragement is given to older children to take part in evening and week-end school club activities and many additional opportunities are given to children to obtain training and recreation through the activities of the various schools' sports associations.